



Fw: Winter Initiatives 2018/19
Susan Scally to: Rothwell, Grace
Cc: Scheduled & Unscheduled Care performance Unit

03/08/2018 09:36

Hi Grace

Following on from your meeting with Joe Ryan earlier this week, can you let us know if we should direct correspondence on winter planning and the development of winter initiatives to you or Joe Ryan, as Damien's successor?

Many thanks,

Susan

Susan Scally | Principal Officer | Scheduled & Unscheduled Care Performance Unit
Department of Health | Hawkins House | Hawkins Street | Dublin D02 VW90
Email: [REDACTED]
Phone: [REDACTED]

----- Forwarded by Susan Scally/SLAINTE on 03/08/2018 09:34 -----

From: "Rothwell, Grace" [REDACTED]
To: "Susan Scally" [REDACTED]
Cc: "Sarah Cooney" [REDACTED]
"Reaz Vawda" [REDACTED]
"Scheduled & Unscheduled Care performance Unit@health.gov.ie"
<Scheduled_&_Unscheduled_Care_performance_Unit@health.gov.ie>
Date: 25/07/2018 17:29
Subject: Re: Winter Initiatives 2018/19

Dear Susan,

I am meeting with Joe Ryan (in Damien's post) on Monday afternoon next, will discuss with him and revert.

Grace Rothwell
Head of the SDU

----- Original message -----

From: Susan Scally [REDACTED]
Date: 25/07/2018 16:58 (GMT+00:00)
To: "Rothwell, Grace" [REDACTED]
Cc: Sarah Cooney [REDACTED] Reaz Vawda [REDACTED]
Scheduled_&_Unscheduled_Care_performance_Unit@health.gov.ie
Subject: Winter Initiatives 2018/19

Dear Grace,

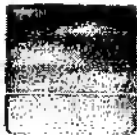
Can you advise if you will be coordinating the winter initiatives/plans by the HSE to address overcrowding in EDs for winter 2018/19 and should the Department liaise with you directly in relation to winter planning and the development of winter initiatives?

Kind regards,

Susan

Susan Scally | Principal Officer | Scheduled & Unscheduled Care Performance Unit
Department of Health | Hawkins House | Hawkins Street | Dublin D02 VW90
Email: [REDACTED]

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Request for Winter 2018/19 plan.

Reaz Vawda to: DDG Operations (ddg.operations@hse.ie)

06/09/2018 10:50

Cc: Scheduled & Unscheduled Care performance Unit

This message is digitally signed.

Dear Ms O'Connor,

Please find attached a request by the Department for details of the plans by the HSE in preparation of Winter 2018/19.

We look forward to your response by the 17th of September.

Thank you.

Kind regards,

Ray.



Request for HSE winter plans 2018-19 - letter to Anne O'Connor DDG.pdf

Ray Vader BSc Neurosci, MSc Clin Neurosci, PhD
Assistant Principal, Unscheduled Care Performance Unit

An Roinn Sláinte
Department of Health

Block 1, Plaza Miesach, 50 - 58 Sráid Bhagóid Íochtarach, Baile Átha Cliath, D02 XW14
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**An Roinn Sláinte
Department of Health**



06 September 2018

Ms Anne O'Connor
Deputy Director General of Operations
Health Service Executive
Doctor Steeven's Hospital
Dublin 8

Subject: HSE Plans for Winter 2018/19

Dear Anne,

As we get closer to the Winter season, I thought it would be useful to update you on progress with the Capacity proposal, and to seek an update on the HSE's preparations to deal with the expected increased demands on the health service over this period.

The Health Service Capacity Review has been presented and discussed with DPER, and we await a decision on funding. We have impressed on DPER the fact that early confirmation of funding will make the initiative more effective. However, the reality is that factors such as the emerging 2018 financial position, Sláintecare and the upcoming Budget mean that we may not have full certainty on the funding position until later this year.

In the meantime, notwithstanding this uncertainty regarding funding for the Health Service Capacity Review, it is important that planning and preparation for winter continues. The Department is aware that preparations and planning has already begun at hospital and local level, and we would be keen to work with the HSE to ensure that these local and regional plans are consolidated and supported through policies and plans at national level to ensure the most effective response to the winter challenges to unscheduled care provision.

For the 2018/19 winter period, the Department is keen that the HSE consolidated winter plan:

- Incorporates targets based on agreed, clear, articulated assumptions regarding demand, performance and capacity;
- Takes into accounts lessons from previous years (including the need for setting agreed targets for each performance indicator);
- Includes governance and accountability arrangements to support the setting of targets, to provide weekly demand and performance forecasts, to monitor and report progress against targets, and ensures corrective action is enacted in a timely and effective manner.

The plans should also reflect the fact that unscheduled care performance is broader than ED performance and encapsulates activity across multiple service areas - primary care, pre-hospital emergency care, acute hospital and social care settings. Therefore, the plan needs to provide a system-wide response, underpinned by integrated operational plans by the Hospital sites and Groups (HGs) and Community Health Care Organisations (CHOs), using management information to profile demand for unscheduled care between October 2018 and March 2019 and capacity to respond.

The plan should also consider reviewing the role of TrolleyGAR with a view to complementing the daily trolley numbers with data on PET compliance rates, length of stay, attendances, admissions and delayed discharges. This is such that data can be used to understand outcomes and ensure that targeted responses are implemented.

As in previous years, it is expected that the core elements of the plan will include primary care measures to reduce ED demand, acute capacity measures to respond to the expected peak in demand during winter, acute non-capacity measures to support surge and patient flow including senior decision makers throughout the hospital and primary and social care measures to assist with hospital discharging and reduce delayed discharges.

We have listed the main points that the Department expects to see in the HSE plans for winter 2018/19 in the Appendix.

Can you please submit the HSE Plan to the Department for consideration on or before the 17th of September 2018?

Yours sincerely,



Greg Campbell

Deputy Secretary General

APPENDIX

In order to ensure that the plan is objective and evidence-driven, it should provide:

- (a) Specific measures and targets to address the known peak in attendance at GPs and Emergency Departments in the last week in December and into early January;
- (b) an organisation chart of the Governance, Accountability and Management structure of the plan;
- (c) national, hospital group and site-specific weekly and monthly retrospective reports (for the preceding week and month and compared to the same period last year) and projections for key metrics including (but not limited to) attendances, admissions, trolley numbers, length of stay, PET compliance, over 75s attendances and admissions, seasonal influenza and other infectious conditions (including CPE), bed use (surge, AMAUs etc, closed beds) and delayed discharging etc;
- (d) targeted solutions and programmes (such as FITT) aimed at reducing trolleys and improving PET times in hospital sites and groups and sites taking account of lessons learned from the implementation of previous winter initiatives and of forecasts outlined in (c) above;
- (e) a performance measurement framework with concrete targets and key performance indicators (input, output, outcome and impact) to measure the effectiveness of the plans, the measures therein and variations in expected performance against the key metrics;
- (f) details of baseline bed capacity in each hospital site as of 1 October and the impact of factors which impact capacity such as average length of stay, bed days used and delayed discharges;
- (g) details of the memorandum of understandings (if any) or other plans, including the commercial arrangements, put in place between each hospital and private hospitals for extra bed capacity;
- (h) the expected impact of the winter plan on scheduled care at hospital group level and the plans to minimise impact of ED challenges on scheduled care;
- (i) the HSE plans to maximise the use of AMAUs through the winter; and,
- (j) a risk assessment and strategy to address unexpected factors which could pressure HGs/CHOs and lead to spikes in trolley numbers and/or delayed discharges, such as adverse weather events, a protracted flu season, staff shortages, outbreak of CPE and mitigating actions to address these



To:
Cc:
Bcc:
Subject: Fw: Fw:Letter from Ms. Anne O'Connor re Winter Plan 2018/2019 and Capacity Proposal 2018

Susan Scally --- Fw:Letter from Ms. Anne O'Connor re Winter Plan 2018/2019 and Capacity Proposal 2018 ---

From: "Susan Scally" [REDACTED]
To: "Aisling McQuaid" [REDACTED]
Date: Thu, 13 Sep 2018 08:45
Subject: Fw:Letter from Ms. Anne O'Connor re Winter Plan 2018/2019 and Capacity Proposal 2018

DDG Operations --- Letter from Ms. Anne O'Connor re Winter Plan 2018/2019 and Capacity Proposal 2018 ---

Fr "DDG Operations" <ddg.operations@hse.ie>
o
m:
To "Greg Dempsey" [REDACTED]
:
Cc "DDG Operations" <ddg.operations@hse.ie>, "JOE RYAN" [REDACTED], "DDG Strategy" <ddg.strategy@hse.ie>, Susan [REDACTED], "Liam Woods" [REDACTED], "Acute Hospitals Division" <acutehospitals@hse.ie>, "Community Operations" <communityoperations@hse.ie>
Da Wed, 12 Sep 2018 18:35
to:
Su Letter from Ms. Anne O'Connor re Winter Plan 2018/2019 and Capacity Proposal 2018
bj
ect

Dear Greg,

Please find attached letter from Ms. Anne O'Connor, Deputy Director General, Chief Operations Officer in response to yours regarding the HSE Winter Plans 2018/2019 and the email from your office to Joe Ryan regarding the Capacity Proposal both on the 6th September 2018.

Regards,

Deirdre McKeown

Oifig an Leas-Stiúrthóir Ginearálta - Príomhfhéidhmeannach Oibríochtaí Oifigeach | Seomra 1.38
| Ospidéal an Dr. Steevens | Baile Átha Cliath 8 | D08 W2A8 |
Office of the Deputy Director General - Chief Operations Officer | Room 1.38 | Dr. Steevens' Hospital
| Dublin 8 | D08 W2A8 |

Tel/Ph: 01 [REDACTED]
R-Phoist/Email: [REDACTED]

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(See attached file: To Mr Greg Dempsey DoH re Capacity Proposal 2018 Winter Plan



2018 12 09 18.pdf) To Mr Greg Dempsey DoH re Capacity Proposal 2018 Winter Plan 2018 12 09 18.pdf



Oifig an Leas-Stiúrthóir Ginearálta-Oibríochtaí
Feldhmeannacht na Seirbhíse Stáinte
Ospidéal Dr. Steevens'
Baile Átha Cliath 8

Office of the Deputy Director General-Operations
Health Service Executive
Dr. Steevens' Hospital
Dublin 8
Tel/Tel: (01) 5352481
Rphost/ E-mail: ddg.operations@hse.ie

12th September 2018

Mr Greg Dampsey,
Deputy Secretary General,
Department of Health,
Block 1, Miesian Plaza,
50 - 58 Lower Baggot Street,
Dublin, D02 XW14

Re: - Capacity Proposal 2018

Dear Greg,

I wish to acknowledge receipt of your letter regarding HSE Winter Plans 2018/2019 and the email from your office to Joe Ryan regarding the Capacity Proposal both on the 6th September 2018.

Winter Plan 2018/2019

The HSE requested its Hospital Groups (HGs) and Community Healthcare Organisations (CHOs) to submit plans indicating their preparedness for the winter and targets for performance to meet the expected demand. Winter plans have been received by the HSE from HGs and CHOs. These are being reviewed by national senior operations teams who are engaging with services in developing them further.

In preparing the capacity proposal, careful consideration was given in terms of the timing and deliverability of each of the elements. Shorter term elements of the proposal pertained to augmenting capacity for the Winter of 2018/2019. The task of developing a Winter Plan for 2018/2019 is frustrated by the absence of any clarity on specific funding levels to which plans can be aligned. It is therefore not possible to prepare and submit a credible plan within the timeline indicated in your letter, i.e. 17th September 2018. The appendix to your letter outlining the required elements of the Winter Plan is helpful and is in line with the form of plan in development.

The HSE will continue to work with HGs and CHOs in the meantime to ensure that all possible measures within current funding parameters are optimised, while awaiting further advice from the Department regarding the necessary funding to mitigate the impact of winter surge.

Capacity Proposal

In our submission to the Department on June 25th 2018, the HSE emphasised the absolute need for a clear decision from the Department on the Capacity Proposal by the end of quarter 2 2018, as the timelines for putting into action the elements to address Winter 2018/2019 were extremely tight. The primary considerations driving the need for an expedited decision were detailed in the proposal and are summarised as follows:

- lead times for international and national recruitment, in particular for doctors and nurses
- construction lead times for modular ward blocks and associated planning risks (permission/procurement/lease/purchase/construction). It should be noted that this delay will impact on modular build lead times not only for 2018/19 but also for 2019/2020.
- timelines for development of detailed work plans for acute beds which also may include procurement

- homecare provider availability - procurement of community short stay beds from the private sector is reliant on new providers tendering for more complex rehabilitative work
- homecare staffing shortages
- detailed planning required to align the various initiatives at service provider level to deliver the required outcomes


While acknowledging the complexities of the discussions with the Department of Public Expenditure and Reform regarding the funding of the proposal, it is nonetheless disappointing that we remain at this point in the year without a decision. A key lesson learned from previous winter initiatives has been the need for an early decision in this regard, thus enabling services to act early in securing workforce, initiating procurement of services and equipment and engaging in the detailed planning to coordinate acute and community services. This requirement was reinforced by feedback from our HGs and CHOs at our recent Unscheduled Care Forum.

From our review of the Winter Planning Process 2017/2018, the HSE is very keen to set realistic but appropriate targets for Hospital Group and CHO performance this winter. In doing so, it is imperative that there is early agreement on the funding availability particularly in relation to community supports as the current funding is over committed.

The findings from the Department's Capacity Review underline the need for simultaneous investment in community and acute services. Given the above and in light of competing demands on Acute and Community Operations at this time, the deadline of the 17th September 2018 to submit the information requested in relation to the Capacity Proposal will not be achievable.

I look forward to engaging with you to progress this important agenda.

Yours sincerely



Anne O'Connor
Deputy Director General
Chief Operations Officer

Cc: Dean Sullivan, Deputy Director General – Strategy and Planning;
Susan Scally, Principal Officer;
Liam Woods, National Director Acute Operations;
David Walsh, National Director Community Operations;
Joe Ryan, National Director of National Services;



Fw: Engagements between DOH and Hospital Groups & CHOs
Paul Bolger to: Aisling McQuaid

11/12/2018 10:30

Paul Bolger
Director Scheduled & Unscheduled Care Performance Unit

An Roinn Sláinte
Department of Health

Block 1, Plaza Missagh, 50 - 58 Sráid Bhagáid Iochtarach, Baile Átha Cliath, D02 XW14
Block 1, Missagh Plaza, 50 - 58 Lower Baginbun Street, Dublin, D02 XW14



----- Forwarded by Paul Bolger/SLAINTE on 11/12/2018 10:30 -----

From: Greg Dempsey/SLAINTE
To: "Anne O'Connor"
Cc: "Acute Hospitals" <acute.hospitals@dohe.ie>, "DDG Strategic Policy" <ddg.strategy@dohe.ie>, "Grace Rothwell" <grace.rothwell@dohe.ie>, "Liam Woods" <liam.woods@dohe.ie>, "Community Operations" <community.operations@dohe.ie>, "Paul"
Date: 27/09/2018 19:59
Subject: Re: Engagements between DOH and Hospital Groups & CHOs

Dear Anne,

The series of meetings you refer to were organised at the request of the Minister, with the high level objective of ensuring that the responsible parties at the CHO and HG's were personally aware of the Minister's focus on the area of scheduled and unscheduled care and to hear from the attendees their views on both the challenges and any improvement initiatives they are progressing.

The meetings are not intended to replace, nor undermine, the existing formal governance lines which exist, and we have sought to ensure that both you and your team were aware of, and invited to the meetings, and it is the case that the HSE were represented at each meeting. My understanding is that, in the course of the meetings, the Minister and officials have been clear that all proposals for performance improvement should be made through the HSE, in line with the normal lines of Governance.

With regard to the Capacity proposal (and winter funding) I will today respond to your recent letter under separate cover

As regards the last line of your email, the governance and oversight arrangements between our organisation as they relate to the area of the scheduled and unscheduled care were revised earlier this year, and I believe are working effectively for the most part. However, I am happy to meet and discuss as you suggest

Regards

Greg

Greg Dempsey
Deputy Secretary

An Roinn Sláinte
Department of Health

Blóc 1, Plaza Miasach, 50 - 58 Sráid Bhagóid (ochtarach, Baile Átha Cliath, D02 XW14
Block 1, Mieslan Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14

www.health.gov.ie

"Anne O'Connor"

Dear Greg I refer to the meetings currently unde...

20/09/2018 18:18:41

From:
To:
Cc:

"Anne O'Connor"
"Greg Dampney"

Date:
Subject:

20/09/2018 18:18

Engagements between DOH and Hospital Groups & CHOs

Dear Greg

I refer to the meetings currently underway between the Minister, your Team and the Hospital Groups and CHOs. I understand that amongst other issues discussed, discussion is taking place in relation to the capacity proposal, with requests being made to those attending to determine what beds could be opened this winter, to prepare submissions on complex discharges with a suggestion that there is funding available for proposals for next year and for proposals for waiting list initiatives that would enable optimal use of NTPF funding.

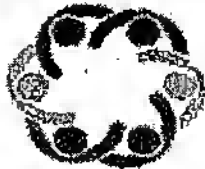
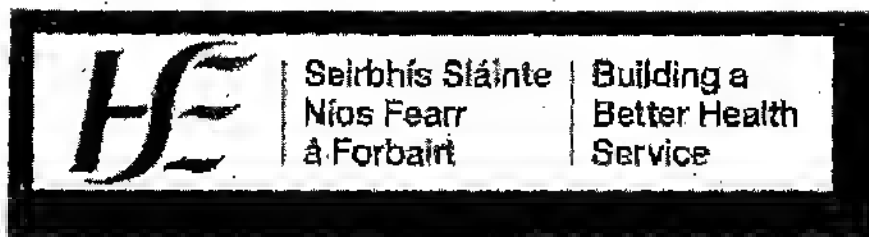
I and the senior Operations Team in the HSE are currently engaging with Groups and CHOs in relation to their Winter preparedness. I would therefore welcome the opportunity to discuss and agree an approach to engagement between DOH and HSE services that acknowledges our respective accountabilities.

Regards

Anne

Anne O'Connor
Deputy Director General Operations - Chief Operations Officer
Health Service Executive
Tel: 01 6352595;

Email: ddg.operations@hse.ie



yourmentalhealth.ie
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Find the #littletthings that work for you - Check out: www.yourmentalhealth.ie

When we go through tough time, little things like talking about our problems, getting regular exercise, drinking less alcohol and being involved in activities we enjoy can make a big difference to how we feel. Find the little things that work for you at yourmentalhealth.ie

"Tá an fhaisnéis sa ríomhphost seo (ceangailtín san áireamh) faoi rún. Balloann sé leis an té ar baoladh chuige amháin agus tá sé ar intinn go bhfaighfidh siad an amháin é agus gurb iad an amháin a chéanfaidh brathnú air. Más rud é nach tusa an duine ar leis é, tá cosc lomán ar an fhaisnéis atá ann, a úsáid, a chraobhacaidheadh, a scaipeadh, a nochtadh, a fíallú, ná a chloípeáil. Seolna gurb iad tuairimí poeasanta an údar atá san ríomhphost agus nach tuairimí FSS iad.

Má tuair tu an ríomhphost seo trí dheannad, bheadh muid buíoch dá gcuidiú in ill don Deasc Seirbhíse ECT ar an nguthán ag [+353 818 300300](tel:+353818300300) nó ar an ríomhphost chuig service.desk@hse.ie agus ansin glan an ríomhphost seo de d' chóras."

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Re: Request for Winter 2018/19 plan

Eoin Madsen to: DDG Operations (ddg.operations@hse.ie)

28/09/2018 10:38

Cc: Kathleen MacLellan, Greg Dempsey, Paul Bolger, Reaz Vawda,
Scheduled & Unscheduled Care performance Unit

Dear Ms O'Connor,

Please find attached copy of a letter issued to you today from Greg Dempsey, Deputy Secretary General in relation to HSE plans in preparation for Winter 2018/19.

Kind regards,
Eoin

Eoin Madsen

Scheduled and Unscheduled Care Performance Unit

An Roinn Sláinte

Department of Health

Block 1, Plaza Miesach, 50 - 58 Sráid Bhagóid Íochtarach, Baile Átha Cliath, D02 XW14

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T+353 1 635 4711

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2018-09-28 Reply to A. O Connor re HSE Plans for Winter 2018-19.pdf



26 September 2018

Ms Anne O'Connor
Deputy Director General of Operations
Health Service Executive
Doctor Steeven's Hospital
Dublin 8

RE: HSE Plans for Winter 2018/19 and updated Capacity Plan

Dear Anne,

I refer to letter reply of 12 September, regarding both HSE Winter Plans 2018/2019 and the Capacity proposal.

I welcome the fact that winter plans have been received by the HSE from HGs and CHOs, and that national senior operations teams within the HSE are engaging with services in developing them further.

In your correspondence, you advise that the task of developing a winter plan is frustrated by the absence of clarity on funding. As I indicated in my original letter, the question of capacity, and now additional winter funding, has been tied to the overall 2018 outturn and the need for a supplementary estimate, and a decision remained unlikely before budget date. Our request, therefore, sought plans which would incorporate proposed measures to respond to expected increased demand, and would therefore support our on-going engagement with DPER for additional funding in 2018.

At this point, I think your suggestion that the plans be produced within current funding parameters is sensible. However, the plans produced on this basis should also include proposals to actions areas where the plans indicate specific challenges. The Department will continue to keep you and your colleagues informed on progress in terms of securing funding.

The allocation of any such funding across service areas, locations and specific service initiatives, can be informed by, and reflect, specific challenges and associated proposals identified by the plans so produced.

[REDACTED]

As you will appreciate, early submission of the Winter Plan and revised capacity plan will support either an early decision or the quantum provided, I would therefore appreciate an indication from you of when the HSE will be in a position to submit the Winter Plan and the updated capacity plan to the Department.

My team and I are available to discuss, if required.

Thanks & regards.

Yours sincerely,

[REDACTED]

Greg Denpsey
Deputy Secretary General



Fw: Request for Winter 2018/19 plan

Eoin Madsen to: Reaz Vawda, Susan Scally, Paul Bolger,
Greg Dempsey

28/09/2018 17:35

From: Eoin Madsen/SLAINTE

To: Reaz Vawda/SLAINTE@SLAINTE, Susan Scally/SLAINTE@SLAINTE, Paul
Bolger/SLAINTE@SLAINTE, Greg Dempsey/SLAINTE@SLAINTE

----- Forwarded by Eoin Madsen/SLAINTE on 28/09/2018 17:33 -----

From: DDG Operations <ddg_operations@hse.ie>

To: "Eoin_Madsen" [REDACTED]

Date: 28/09/2018 17:35

Subject: RE: Request for Winter 2018/19 plan

Dear Eoin

I wish to acknowledge receipt of your email enclosing the letter from Greg Dempsey to Anne O'Connor and confirm that it is receiving attention.

Regards,

Deirdre McKeown

Oifig an Leas-Stiúrthóir Ginearálta - Príomhfheidhmeannach Oibríochtaí Oifigeach | Seomra 1.38

| Ospidéal an Dr. Steevens | Baile Átha Cliath 8 | D08 W2A8 |

Office of the Deputy Director General - Chief Operations Officer | Room 1.38 | Dr. Steevens' Hospital

| Dublin 8 | D08 W2A8 |

Tel/Ph: 01 6352481

R-Phoís/Email: [REDACTED]

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From: Eoin_Madsen [REDACTED]

Sent: 28 September 2018 10:39

To: DDG Operations

Subject: Re: Request for Winter 2018/19 plan

Dear Ms O'Connor,

Please find attached copy of a letter issued to you today from Greg Dempsey, Deputy Secretary General in relation to HSE plans in preparation for Winter 2018/19.

Kind regards,

Eoin

—
Eoin Madsen

Scheduled and Unscheduled Care Performance Unit

—
An Roinn Sláinte

Department of Health

Block 1, Plaza Miesach, 50 - 58 Sráid Bhaigóid Iochtarach, Baile Átha Cliath, D02 XW14

Block 1, Miesian Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14

—
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Má fuair tú an ríomhphost seo trí dheanmad, bheadh muid buíoch dá gcuirfeá in iúl don Deasc Solbhaí ECT ar an nguthán ag [+353 818 300300](tel:+353818300300) nó ar an ríomhphost chuig service.desk@hse.ie agus ansin grian an ríomhphost seo ded' chóras."

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Fw: Submission on Winter Funding and Capacity
Susan Scally to: Léa Valance
Cc: Aisling McQuaid

10/12/2018 13:23

----- Forwarded by Susan Scally/SLAINTE on 10/12/2018 12:34 -----

From: Susan Scally/SLAINTE
To: Paula Smeaton/SLAINTE@SLAINTE
Cc: Joanne Lonergan/SLAINTE@SLAINTE, Sarah Bardon/SLAINTE@SLAINTE, Greg Dempsey/SLAINTE@SLAINTE, Scheduled & Unscheduled Care performance Unit
Date: 09/10/2018 16:09
Subject: Submission on Winter Funding and Capacity

Paula,

I would be grateful if you would bring the attached submission on winter funding and capacity, which has been signed off by the Secretary General, to the attention of the Minister.

A hard copy of the submission is en route to your office for approval of Minister Harris.

Regards,

Susan

Susan Scally | Principal Officer | Scheduled & Unscheduled Care Performance Unit
Department of Health | Hawkins House | Hawkins Street | Dublin D02 VW90
Email: [REDACTED]
Phone: [REDACTED]

----- Forwarded by Susan Scally/SLAINTE on 09/10/2018 16:07 -----



Scan_09-10-2018-155704.pdf

1. Greg Dempsey
2. Secretary General *SB/10*
3. Minister Harris

cc Joanne Lonergan, Susan Scally

From Paul Bolger, Scheduled and Unscheduled Care
8 October 2018

Follow-up to Option 2 in "Budget 2019 – Winter funding – Options for consideration"

- Please find below table setting out further details on Option 2
- I have identified just under 300 beds for opening in Q3 2019. This is based upon a desk-top review of the HSE Capacity Plan and subject to confirmation with the HSE.
- I have included projects with an estimated capital cost of €12 million in total against a Budget of €10 million. This is to take account of potential slippage in timelines and delivery (as experienced this year). An agreed timeline for delivery would be agreed with the HSE, the money would be retained in the Department, the release of funding would be managed throughout 2019 and the maximum expenditure of €10 million would be funded in 2019.
- It is not possible to accommodate three large projects in three model 4 hospitals:
 - o UHL - 60 Bed Modular block – Capital cost in 2019 €18.5 million and full year revenue of €7 million – UHL confirm they have a contract agreed (subject to funding) and would have build complete in Q4 2019.
 - o Tallaght Cross Proposal – 22 Beds - Full year revenue cost of €7.7 million.
 - o Mater - 28 Beds as Acute Floor in Whitty Wing - €5 million Capital and full year revenue of €5 million.
- Following a further review of the three options prepared last night, and taking account of the evidence base set out in the Capacity Review, I would recommend Option 2.
- If this approach is agreed, I recommend the following speaking point:
 - o "As part of Winter funding, for 2018, €10 million will be invested in a range of measures to support the system to prepare for the known challenges over the remainder of this year. This will include measures to support discharging from hospital. This cost of these measures will not recur in 2019.
 - o In addition, I have secured investment of €10 million for capital investment in capacity in advance of Winter 2019/2020. My Department will finalise the details of this capital investment, in consultation with the HSE, in the coming week."

*Paul – for noting
I'd like those indicated (x)
looked at more closely &
determine their contribution to the
management of winter pressures
into the future
I understood there may be
an option on Tallaght Cross given
learning which might have potential
initiation of projects there will
be a need to a
full year revenue implications*

SB/10

SECRETARY GENERAL'S OFFICE

Doc:

Rec'd By: *SB*

9/10

9/10

Option 2 -- Beds to be ready for Winter 2019 (Q3 2019)

Hospital Group	Hospital	Type of Bed	Total no. beds proposed	Capital Costs (millions)	Revenue Costs full year	August 2018 YTD	Jul-17 to Aug-18 Daily Average
CSI	Beaumont	Inpatient	20	3.80	3.34	1,531	1
CSI	Managhán to support step down *	Inpatient	5		0.73		
CSI	Connolly	Inpatient	20	0.35	2.17	1,969	
CSI Total			55	4.15	6.24	3,500	2
DME	Fallagh	Inpatient	6	0.15	0.54	4,739	1
DME	Midland Regional Hospital Tullamore	Inpatient	6	0.25	0.37		
DME	Midland Regional Hospital Tullamore	Inpatient	7	0.1	0.32		
DME	Midland Regional Hospital Tullamore	Inpatient	8		0.24		
DME	Midland Regional Hospital Tullamore	Inpatient	12	0.10	1.02		
DME	Midland Regional Hospital Tullamore	Inpatient	4	0.00	0.45	2,661	11
DME Total			59	0.77	3.55	7,400	57
ENG	Colmcille (St Vincent's Stroke Rehab)	Inpatient	8	0.05	0.91		
ENG	St Michael's (St Vincent's Pathway) *	Inpatient	12	0.24	1.36		
ENG	OLH Naven *	Inpatient	24	1.20	2.97	955	4
ENG Total			44	1.59	5.24	13,516	158
CHG	Fallagh	Inpatient	3		0.20	54	0
CHG	Our Lady's Children's Hospital Crumlin *	Inpatient	3		0.22		
CHG	Our Lady's Children's Hospital Crumlin *	Inpatient	3	0.03	0.76	486	3
CHG	Temple Street *	Inpatient	8	0.50	1.24	600	4
CHG Total			15	0.53	2.42	1,140	7
Sac La	Letterkenny LH	Inpatient	20	0.81	2.13	1,966	8
Sac La	Mayo LH	Inpatient	10	0.33	1.31	1,441	7
Sac La	GLH	Inpatient	4		0.49		
Sac La	CUH	Inpatient	6		0.41		
Sac La	GLH	Inpatient	8		1.27	5,591	22
Sac La Total			48	1.14	5.61	7,998	37
SSWHG	UH Kerry	Inpatient	31	2.70	3.98	2,947	30
SSWHG	UH Waterford	Inpatient	6	0.23	0.92		
SSWHG	UH Waterford	Inpatient	30	1.00	3.37	3,964	19
SSWHG	CUH	Inpatient	1	0.01	0.08		
SSWHG	CUH	Inpatient	3	0.05	0.40		
SSWHG	CUH	Inpatient	5	0.04	1.06		
SSWHG	CUH	Inpatient	4	0.33	0.40	4,091	14
SSWHG	Mercy University Hospital - CUH Rehab	Inpatient	3		0.21	2,517	11
SSWHG	South Infirmary	Inpatient	3		0.48		
SSWHG Total			86	3.37	10.84	15,979	74
UL	UL	Inpatient	5	0.15	0.57		
UL	UL	Inpatient	3		0.57		
UL Total			8	0.15	1.14		
Totals			299	12	35	67,422	282



Fw: Letter of determination - Instruction from Minister re Winter planning
Paul Bolger to: Aisling McQuaid 15/10/2018 15:17
 Cc: Scheduled & Unscheduled Care performance Unit

History: This message has been forwarded.

Paul Bolger
 Director Scheduled & Unscheduled Care Performance Unit

An Roinn Sláinte
 Department of Health

Blac 1, Plaza Miesach, 50 - 58 Sráid Bhagóid Iochtarach, Baile Átha Cliath, D02 XW14
 Block 1, Miesian Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14



— Forwarded by Paul Bolger/SLAINTE on 15/10/2018 15:17 —

From: Paul Bolger/SLAINTE
To: Colm Desmond/SLAINTE@SLAINTE
Cc: seegen/SLAINTE@SLAINTE, Greg Dempsey/SLAINTE@SLAINTE, Kathleen MacLellan/SLAINTE@SLAINTE, Fionnuala Duffy/SLAINTE@SLAINTE, Aonraid Dunne/SLAINTE@SLAINTE, Susan Scally/SLAINTE@SLAINTE, Niall Redmond/SLAINTE@SLAINTE
Date: 12/10/2018 17:56
Subject: Letter of determination - Instruction from Minister re Winter planning



20181011201045404.pdf Winter Planning 2019 - Options.docx



1. Colm Desmond

cc: Secretary General, Greg Dempsey, Kathleen MacLellan, Fiona Prendergast, Aonraid Dunne, Susan Scally, Niall Redmond

- I refer to the attached submissions regarding the allocation of Winter funding in 2018 and specifically to the Minister's approval subject to the conditions set out in his handwritten note.
- The Minister has decided to split the Budget 2019 Winter funding of €10 million in 2018 and €10 million in 2019 into two distinct pots – (1) **Once off 2018 measures** to support Winter 2018/2019 and (2) **Capacity to 'build' beds** in preparation for Winter 2019/2020 subject to the following:
 1. *"Deployment of social care measures as a matter of urgency between now and year end"*
 2. *A direction as part of the letter of determination to the HSE for a significant uplift in home care and social care from Jan-March 2019*

3. *A separate discussion as part of our Capital Planning process on UHL modular which I want to see some progress on (but this discussion should not delay progressing other measures and beds)"*
- My unit, in conjunction with Services for Older Persons (SFOP) will progress item 1 and I will contact Aonraid directly on item 3.
 - My unit will also separately follow up with you on the financial aspects of the Capacity piece for 2019 in line with the note from the Secretary General and the Minister.
 - Can you please consider the inclusion of item 2 in the Letter of Determination. In addition to the Ministers reference to Jan-March, I would propose that a similar uplift will be required in Q4 2019 and this should be referenced in the Letter of Determination also.
 - Niall Redmond, SFOP, has proposed that the Letter of Determination make reference to the need to include a winter management aspect/chapter in the NSP along with associated estimated activity levels/targets across all service areas. I would fully support this proposal.

Paul Bolger
Director Scheduled & Unscheduled Care Performance Unit

An Roinn Sláinte
Department of Health

Bloc 1, Plaza Miesach, 50 - 58 Sráid Bhagóid Íochtarach, Baile Átha Cliath, D02 XW14
Block 1, Miesian Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14



— Forwarded by Paul Bolger/SLAINTE on 12/10/2018 16:35 —

From: Joanne Lonergan/SLAINTE
To: Paul Bolger/SLAINTE@SLAINTE, Susan Scally/SLAINTE@SLAINTE, Greg Dempsey/SLAINTE@SLAINTE
Cc: Paula Smeaton/SLAINTE@SLAINTE, Sarah Bardon/SLAINTE@SLAINTE
Date: 12/10/2018 13:57
Subject: Budget 2019 - Winter Funding Options Submission - SCH/PRO/0/144082

Hi All,

Please see submission with Minister's approval and handwritten note. Hard copy in Paula's tray in LH.

Thanks,
Jo

1. Greg Dempsey
2. Secretary General *noted 28/10*
3. Minister Harris

cc Joanne Lonergan, Susan Scally, Niall Redmond

From Paul Bolger, Scheduled and Unscheduled Care
8 October 2018

Budget 2019 – Winter funding – Options for consideration

- In Budget 2019, provision has been made for €10 million investment before end 2018 which will carry into 2019 i.e. €10 million in Q4 2018 and €10 million in 2019 ELS, for targeted initiatives to alleviate the additional demand on health services over the winter months.
- In Budget 2019, no specific funding has been provided for additional capacity.
- The purpose of this note is set out options for this Winter Funding in both 2018 and 2019 and to identify options that could see elements of the Capacity Plan advanced in 2019.
- As we have yet to receive proposals from the HSE in this regard, the note is high level and the options areas subject to review with the HSE and other units in the Department.
- While I have presented 3 options as stand-alone items, there is flexibility in each option to scale up or down various elements.
- However, as the level of funding being provided for Winter 2019 is much less than previous years, I would recommend focusing the available investment on a smaller number of high impact measures. In addition the health service is limited in the types of investment that can be delivered in Q4 2018 due to lead times for staffing and procurement of services.

Option 1

- As has been the case in previous years, the winter funding will be split between Social Care, Primary Care and Acute measures.
- In addition to social care measures to support discharging, once off Primary care measures, particularly in aids and appliances, and non-Capacity Acute measures such support for surge measures, senior decision makers and access to diagnostics will make up the balance of the 2018 measures and Q1 2019 measures.
- If funding is targeted at Home Support Packages (HSP's) the cost in 2018 is modest, however, each HSP administered in 2018 has a full year cost of c.€15,600 in 2019. While such packages are recycled as appropriate, the impact of the additional package in supporting discharging from hospital appears to be greatest the first time it is used.

Option 1 (a)

- Approval of 700 additional packages over 22 weeks (20 HSP per week from 1 November 2018 and 40 packages per week for the first 13 weeks in 2019) would cost €10 million in 2019.

Option 1 (b)

- Transitional Care Beds (TCBs) cost on average €1,900 per week and the average length of stay is 3 weeks. Therefore, there is no long-term budget impact from TCB's. Approval of 70 TCB's per week from 1 November 2018 to end 2019 would cost €1.6m in 2018 and €7 million in 2019
- All of these measures – the Social Care, Primary Care and non-Capacity Acute measures are designed to support the system to prepare for the known increase in demand over the coming months and to assist discharging from hospital to home or community. The benefit of these measures will be greatest in Q1 2019 where hospital attendances and admissions are at their peak.
- However, under option 1 (a & b) there is no scope to invest in Capacity.

Option 2

- A second option is to split the Budget 2019 Winter funding into two distinct pots – (1) Once off 2018 measures to support Winter 2018/2019 and (2) Capacity to 'build' beds in preparation for Winter 2019/2020.
- Transitional care beds, primary care measures, particularly in aids and appliances, and non-Capacity Acute measures such support for surge measures, senior decision makers and access to diagnostics would form the basis of the 2018 measures – with no further investment in measures to support discharging or pressures in Q1 2019 measures.
- The €10 million in 2019 could be used to invest in Bed Capacity for Winter 2019/2020
- The revised Capacity Proposals from the HSE identifies 260 acute beds that could be delivered and opened by Q3 2019. The capital costs associated with these beds is €10 million in 2019. The estimated revenue cost is €18 million in 2019 and €30 million in a full year.
- The 2019 element of the Winter funding could be used to fund the Capital elements associated with these 260 beds, with a view to being able to open the beds in preparation for Winter 2019/2020.
- However, this will negatively impact on the ability of the system to manage the increased demand in Q1 2019 in comparison to option 1.

Option 3

- A third option is to split the Budget 2019 Winter funding into three distinct pots – (1) Once off 2018 measures to support Winter 2018/2019; (2) Capacity to build beds in preparation for Winter 2019/2020 and (3) Investment in Older Persons Frailty (FIT).
- Transitional care beds, primary care measures, particularly in aids and appliances, and non-Capacity Acute measures such support for surge measures, senior decision makers and access to diagnostics would form the basis of the 2018 measures – with no further investment in measures to support discharging or pressures in Q1 2019 measures.
- Of the 260 beds listed in option 2, the first 130 beds require €2 million capital investment and could be open and staffed in Q4 2018 at an additional cost of €3.5 million.
- The HSE capacity plans also identified the introduction of Frail Intervention Therapy Team (FIT) in 16 locations as a key intervention in 2019 to support admission avoidance and early discharge for older persons. Presentations on the benefits of FIT teams also featured extensively at the recent EO Taskforce Conference in Dublin Castle. The total cost is estimated at €4.6 million in 2019, subject to

recruitment. The investment of the winter 2019 funding in a sustainable solution such as FITT could have long last benefit for in H2 2019 and future years.

- However, this will negatively impact of the ability of the system to manage the increased demand in Q1 2019 in comparison to option 1.

I am available to discuss further this evening.

PROSECUTOR GENERAL'S OFFICE	
Ref No:	
Tracked by:	out
Date:	9/10

File Ref: SCH/PRO/0/144082

9th October 2018

For attention of: Paula Smeaton, Private Secretary to Minister Harris

Paula,

Please find enclosed the *Budget 2019 – Winter funding – Options for consideration* submission for Minister Harris' approval in relation to the Capacity Plan.

Kind regards,

APPROVED

Léa Valance, Scheduled and Unscheduled Care Performance Unit

7
P.T.O

Happy to approve Option 2 as
recommended subject to the following:

- (1) Deployment of social care resources
as a matter of urgency between
now and year end.
- (2) A direction as part of the letter
of submission to the HSC to
provide for a significant uplift
in home care & social care services
from March 2019.

(3) A separate discussion of
role of or capital planning
process on UK Modeler
which I want to see some
progress on (but this
discussion should not delay
progressing other measures +
etc)

Thanks for your work
on this,

Simon Hines

10/10

1. Greg Dempsey
2. Secretary General *8/9/18*
3. Minister Harris

cc Joanne Lonergan, Susan Scally

From Paul Bolger, Scheduled and Unscheduled Care
8 October 2018

Paul - for noting
I'd like the HSE indicated (x)
looked at more closely to
determine their contribution to the
management of winter pressures
into the future
I understood there may be
an option on Tallaght Cross ground
leasing which might have potential
initiation of a project before
but for PEA/Government the
full year revenue implications

Follow-up to Option 2 in "Budget 2019 - Winter funding - Options for consideration"

- Please find below table setting out further details on Option 2
- I have identified just under 300 beds for opening in Q3 2019. This is based upon a desk-top review of the HSE Capacity Plan and subject to confirmation with the HSE.
- I have included projects with an estimated capital cost of €12 million in total against a Budget of €10 million. This is to take account of potential slippage in timelines and delivery (as experienced this year). An agreed timeline for delivery would be agreed with the HSE, the money would be retained in the Department, the release of funding would be managed throughout 2019 and the maximum expenditure of €10 million would be funded in 2019.
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 - Tallaght Cross Proposal - 22 Beds - Full year revenue cost of €7.7 million.
 - Mater - 28 Beds as Acute Floor in Whitty Wing - €5 million Capital and full year revenue of €6 million.
- Following a further review of the three options prepared last night, and taking account of the evidence base set out in the Capacity Review, I would recommend Option 2.
- If this approach is agreed, I recommend the following speaking point:
 - "As part of Winter funding, for 2018, €10 million will be invested in a range of measures to support the system to prepare for the known challenges over the remainder of this year. This will include measures to support discharging from hospital. This cost of these measures will not recur in 2019.
 - In addition, I have secured investment of €10 million for capital investment in capacity in advance of Winter 2019/2020. My Department will finalise the details of this capital investment, in consultation with the HSE, in the coming week."

2018 OCT 9 PM 15:05

Paul

Received By: m

Date: 9/10

22
22
9/10



19 October 2018

Ms Anne O'Connor
Deputy Director General of Operations
Health Service Executive
Doctor Steeven's Hospital
Dublin 8

Subject: Budget 2019: Funding for Q4 2018 and Bed Capacity

Dear Anne,

I am writing to confirm the details of additional funding for winter measures in 2018 and bed capacity in 2019 as announced in Budget 2019 and discussed at our meeting yesterday.

In summary:

- An additional €10 million in once-off funding is available in the Supplementary Estimates to support the HSE plans to manage the known increase in demand that our health services will experience over the coming months, with a focus on supporting patients in the over 75 age group.
- An additional €10 million is available in the HSE allocation for 2019, and on an ongoing basis, for investment in bed capacity.

€10 million for Winter 2018

Minister Harris has requested that social care measures are prioritised and deployed as a matter of urgency between now and the end of 2018, with a focus on measures to support older patients transition from acute care to the most appropriate setting. Therefore, a minimum of €5 million should be allocated to measures to support this transition. This letter confirms sanction for expenditure to start with immediate effect for these measures. I would be grateful if you could provide details of the measures by site/CHO, confirmation of commencement and the expected impact as soon as possible.

For the remaining €5 million, priority should be given to acute care, primary care, and further social care measures to support hospital avoidance, patient flow, hospital discharging and the treatment of patients in the appropriate care settings. The Department will sanction the release of this funding as soon as possible following submission of a costed proposal to the Department by the HSE.

The €10 million of Winter funding is once-off and must be recorded within the 2018 financial year and cannot overrun into 2019.

As outlined in the Letter of Determination¹, the Minister requires that services are planned in 2019 to meet critical periods of demand; including an uplift in planned activity in Community and Primary Care.

The consolidated Winter Plans should take account of this additional once-off funding and the requirement from the Minister. As outlined in correspondence of 6 September and subsequent correspondence, the consolidated winter plan should include details of:

- the specific actions being taken to improve performance, taking account of lessons learned exercise;
- the governance and accountability arrangements that will be in place to support, monitor and lead the Hospital Groups and CHOs over the Winter;
- the forecast demand for services over the period including forecasts for attendance and admission of all patients and over 75's and the associated increase in activity planned to meet this demand; and
- the projected performance targets including weekly trolley numbers by hospital group, PET for over 75's and delayed discharging over the Winter period.

As planning is at an advanced stage, I look forward to receiving the consolidated winter plan as soon as possible, but no later than 9 November 2018. Please include details of the additional measures that the HSE will fund in Q4, including a breakdown by hospital site and targeted impact of this investment as part of this submission.

€10 million for Investment in Bed Capacity in 2019

Minister Harris has decided to ring-fence €10 million for investment in bed capacity, with a focus on increasing capacity in advance of Winter 2019. From 2019, and on an ongoing basis, this €10 million is included in the HSE allocation. The investment in additional capacity has the core objective of supporting the management of winter pressures into the future. Based upon a review of the HSE Capacity Plan 2018 – 2020, it is estimated that approximately 250 beds could be ready for opening in advance of Winter 2019, subject to the recruitment of staff and the identification of revenue to meet the ongoing costs associated.

My team and I are available, as always, to work with colleagues in the HSE to review the sites identified in phases 1, 2 & 3 of the capacity proposal, in order to agree a programme of work for 2019 that maximises this investment and that can be included in the National Service Plan for delivery in 2019.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

¹ 17 October 2018

[REDACTED]

Yours sincerely,

[REDACTED]

Paul Bolger
Director, Scheduled & Unscheduled Care Performance



Fw: Bed Capacity 2019 - Identification of sites for development in 2019 - for discussion

Susan Scally to: Léa Valance
Cc: Aisling McQuaid

10/12/2018 13:38

Susan

Susan Scally | Principal Officer | Scheduled & Unscheduled Care Performance Unit
Department of Health | Hawkins House | Hawkins Street | Dublin D02 YW90
Email: susan_scally@health.gov.ie
Phone: 01635 3046

----- Forwarded by Susan Scally/SLAINTE on 10/12/2018 13:37 -----

From: "DDG Operations" <ddg.operations@hse.ie>
To: "Paul" [REDACTED]
Cc: [REDACTED]

Date: 26/10/2018 17:51
Subject: RE: Bed Capacity 2019 - Identification of sites for development in 2019 - for discussion

Dear Paul,

Please find attached letter from Ms. Anne O'Connor, Deputy Director General Chief Operations Officer in response to yours of the 19th October 2018 and emails of the 22nd and 25th October 2018.

Many thanks

Regards,

Deirdre McKeown

Oifig an Leas-Stiúrthóir Ginearálta - Príomhfhéidhmeannach Oibríochtaí Oifigeach | Seomra 1.38
| Ospidéal an Dr. Steevens | Baile Átha Cliath 8 | D08 W2A8
Office of the Deputy Director General - Chief Operations Officer | Room 1.38 | Dr. Steevens' Hospital
| Dublin 8 | D08 W2A8 |

Tel/Ph: 01 [REDACTED]
R-Phoist/Email: [REDACTED]

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From: Paul Bolger [REDACTED]
Sent: 25 October 2018 11:52

To: DDG Operations

Subject: Re: "e" Capacity 2019 - Identification of sites for development in 2019 - for discussion

Dear Anne, and colleagues,

Can you please confirm receipt of my email below and that the winter initiatives to support discharging have commenced.

Regards

Paul

Paul Bolger

Director Scheduled & Unscheduled Care Performance Unit

An Roinn Stáinte

Department of Health

Bloc 1, Plaza Miesach, 50 - 58 Sráid Bhagóid Íochterach, Baile Átha Cliath, D02 XW14

Block 1, Mieslan Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14

From: Paul Bolger/SLAINTE

To: "DDG Operations" <ddg.operations@hse.ie>, "Liam Wood" <liam.wood@hse.ie>, "JOE RYAN" <joe.ryan@hse.ie>, "ANGELA FITZGERALD" <angela.fitzgerald@hse.ie>

Cc: "Grace rothwell" <grace.rothwell@hse.ie>, "Greg Dempsey" <greg.dempsey@hse.ie>, Susan Scally/SLAINTE@SLAINTE, Aisling McQuaid/SLAINTE@SLAINTE, Scheduled & Unscheduled Care performance Unit

Date: 22/10/2018 10:24

Subject: Bed Capacity 2019 - Identification of sites for development in 2019 - for discussion

Anne,

As discussed last week, please find attached, for discussion, sites identified from phase 1-3 of Capacity Plan for investment in 2019.

Can you please advise who I should follow up with on your team to advance this priority project.

Many thanks

Paul

Paul Bolger

Director Scheduled & Unscheduled Care Performance Unit

An Roinn Sláinte

Department of Health

Block 1, Missian Plaza, 50 - 58 Sraid Bhagóid Íochtarach, Baile Átha Cliath, D02 XW14

Block 1, Missian Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14

----- Forwarded by Paul Bolger/SLAINTE on 22/10/2018 10:18 -----

From: Aisling McQuaid/SLAINTE

To: "DDG Operations' (ddg_operations@hse.ie)" <ddg_operations@hse.ie>

Cc: Greg Dempsey/SLAINTE@SLAINTE, Paul Bolger/SLAINTE@SLAINTE, Susan Scally/SLAINTE@SLAINTE, Finance Unit, Colm Desmond/SLAINTE@SLAINTE, Niall Redmond/SLAINTE@SLAINTE, Kathleen MacLellan/SLAINTE@SLAINTE, Scheduled & Unscheduled Care performance Unit

Date: 19/10/2018 11:41

Subject: Budget 2019: Funding for Q4 2018 and Bed Capacity

Good morning Anne,

I attach, for your information, correspondence from Paul Bolger, in relation to 'Budget 2019: Funding for Q4 2018 and Bed Capacity'.

A hard copy of this letter will be sent to you in today's post.

Kind regards,

Aisling

Aisling McQuaid

Assistant Principal, Scheduled & Unscheduled Care Performance Unit

An Roinn Sláinte

Department of Health

Blóc 1, Plaza Miesach, 50 - 58 Sráid Bhagáid Íochtarach, Baile Átha Cliath, D02 XW14

Block 1, Miesian Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14

T +353 01 635 4579

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When we go through tough time, little things like talking about our problems, getting regular exercise, drinking less alcohol and being involved in activities we enjoy can make a big difference to how we feel. Find the little things that work for you at yourmentalhealth.ie

Tá an fhaisnéis sa ríomhphost seo (ceangaláin san éireamh) faoi rún. Bainneann sí leis an té ar saoladh chuige amháin agus tá sí ar intinn go bhfaighfidh siad an amháin é agus gurb iad an amháin a dhéanfaidh breithniú air. Más rud é nach tusa an duine ar leis é, tá cosc lomán ar aon fhaisnéis atá ann, a úsáid, a chraobhascólleadh, a scaipeadh, a riochtadh, a fhóisiú, ná a chloipeáil. Seaine gurb iad tuairimí páirteanta an údar atá san ríomhphost agus nach tuairimí FBS iad.

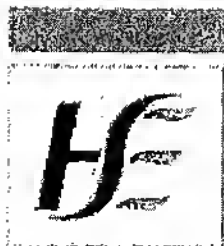
Má fuair tú an ríomhphost seo trí dhearmad, bheadh muid buíochas dá gcuid faoi in bfuil don Deasc Seirbhíse ECT ar an nguthán ag [+353 816 300300](tel:+353816300300) nó ar an ríomhphost chuig service.desk@hse.ie agus ansin glan an ríomhphost seo d'ad' chórais.*

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10-221018-01 Letter to Mr. Paul Bolger DoH re Budget 2019 Funding for Q4 2018 and Bed Capacity 26.10.18.pdf



Óifig an Leas-Stiúrthóir Ginearálta-Oibríochtaí
Feidhmeannaíocht na Seirbhíse Síolta
Ospidéal Dr. Steevens'
Baile Átha Cliath 8

Office of the Deputy Director General-Operations
Health Service Executive
Dr. Steevens' Hospital
Dublin 8
Tel/Tel: (01) 6352481
Rphost/ E-mail:ddg.operations@hse.ie

26th October 2018

Mr. Paul Bolger
Director, Scheduled & Unscheduled Care Performance
Department of Health
Block 1, Mission plaza
50-58 Lower Baggot Street
Dublin 2
D02 XW14

Re: Budget 2019: Funding for Q4 2018 and Bed Capacity

Dear Paul,

I refer to your letter of the 19th October 2018 regarding funding for Q4 2018 and Bed Capacity and follow-up emails of the 22nd and 25th October 2018. Thank you for forwarding the sites identified from phase 1-3 of the Capacity plan for investment in 2019.

I note your query in relation to the commencement of winter initiatives to support discharging, however as you will be aware from our discussions, such initiatives are, in the main, dependent on additional funding. Based on current percentage bed utilisation, in the absence of increased bed capacity, Winter 2018 will be challenging. While the €10m (non-recurring) is welcome, the impact of flow initiatives without significant surge capacity will be limited.

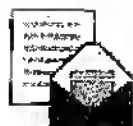
In light of your letter of the 19th October 2018 and request for a consolidated Winter Plan to be submitted by the 9th November 2018, we are now working to identify measures that can be initiated on the basis of the additional once-off funding to be allocated in 2019. We expect to have the consolidated plan ready for submission to the DoH by the 9th November 2018 as requested.

I will liaise with Dean Sullivan, Deputy Director General, Strategy & Planning to agree a nominee to review the capacity submission and to agree a programme of work for 2019 that will maximize the €10m investment in 2019.

In response to your request in relation to the development of a protocol for reporting and communications over the Winter period, I am nominating Ms. Grace Rothwell, Head of the SDU to liaise with your team on behalf of the HSE.

Yours sincerely,

Anne O'Connor
Deputy Director General
Chief Operations Officer



Fw: Briefing Note for Secretary General's meeting tomorrow
 Susan Scally to: Léa Valance
 Cc: Aisling McQuaid

10/12/2018 13:22

----- Forwarded by Susan Scally/SLAINTE on 10/12/2018 12:44 -----

From: Susan Scally/SLAINTE
To: Paul Bolger/SLAINTE@SLAINTE
Cc: Eoin Madsen/SLAINTE@SLAINTE, Aisling McQuaid/SLAINTE@SLAINTE, Rasz Vawda/SLAINTE, Léa Valance/SLAINTE@SLAINTE
Date: 31/10/2018 18:14
Subject: Briefing Note for Secretary General's meeting tomorrow

Paul

Please find note for information of Secretary General on ED performance as requested, prepared by Eoin.

Susan

Susan Scally | Principal Officer | Scheduled & Unscheduled Care Performance Unit
 Department of Health | Hawkins House | Hawkins Street | Dublin D02 VW90.



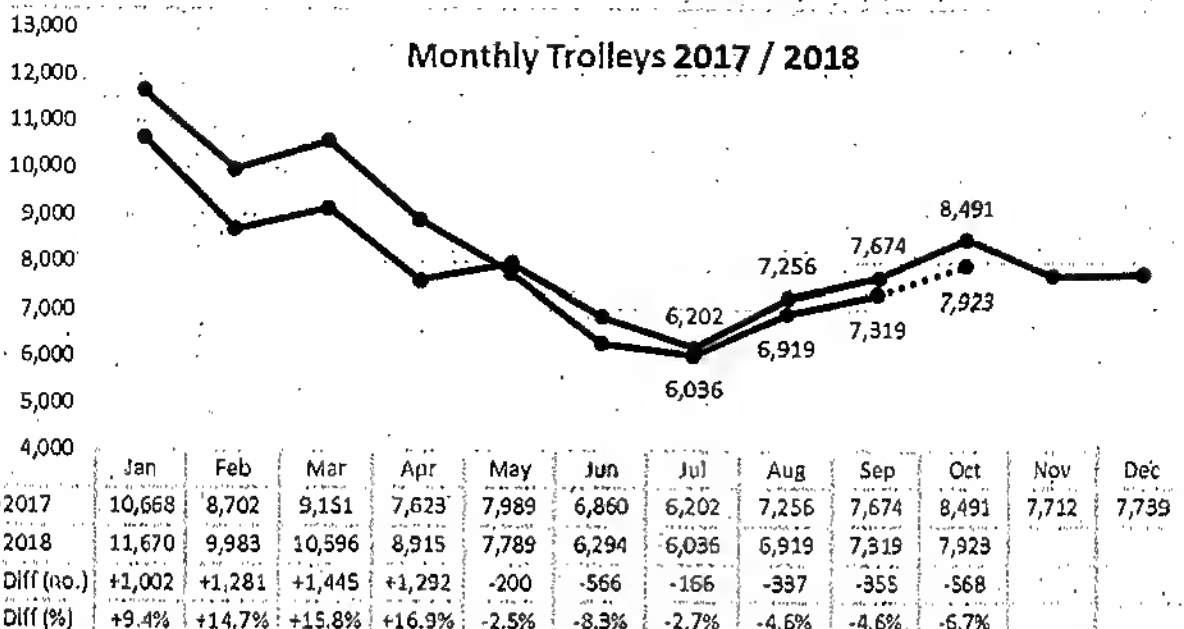
2018-10-12 Weekly USCP Note to Minister on ED performance 2018 - Week 40.docxfin.docx

Briefing Note for Secretary General on ED Performance

Table 1 (Appendix) shows a summary of all ED performance metrics at the national level.

1. 8AM Trolleys – as measured by HSE TrolleyGAR (counted at 8AM each day)

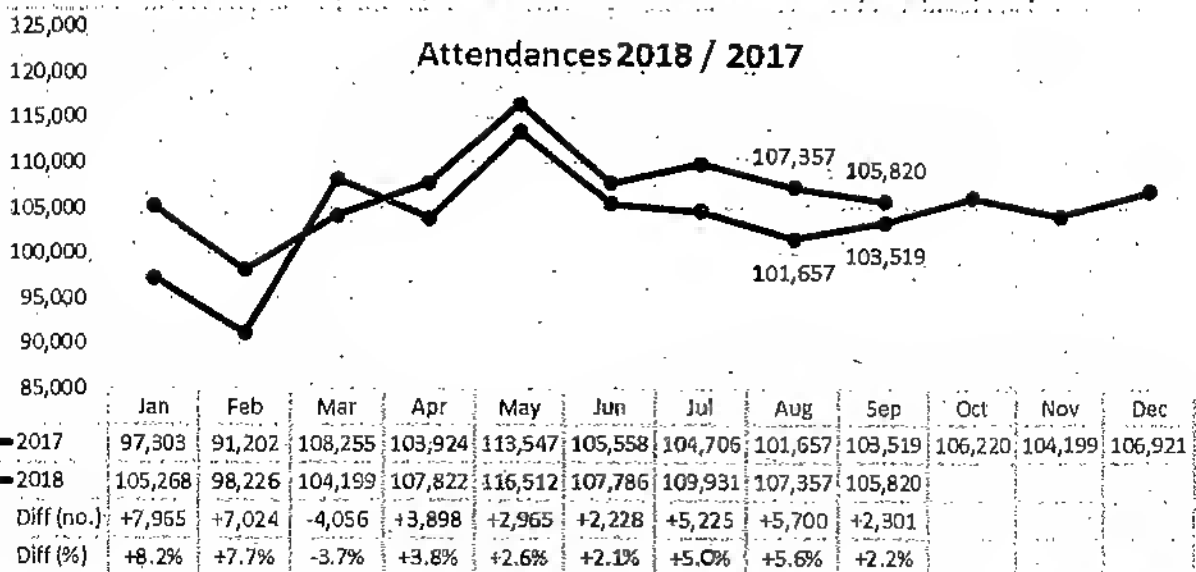
- This year to date, there have been 75,521 8AM trolleys, 3,396 (+4.7%) more than the same period last year (72,125).
- There were 7,319 8AM trolleys in September 2018, which was 400 (+5.8%) more than the previous month (6,919), and 355 (-4.6%) fewer than the same month last year (7,674).



Trolley data excludes Children's Hospital Group and St. Michael's. St Michael's hospital started reporting data consistently only from week 44 of 2017 onwards. Figure for October 2018 is provisional based on aggregate of daily HSE TrolleyGAR and is not validated.

2. ED Attendances

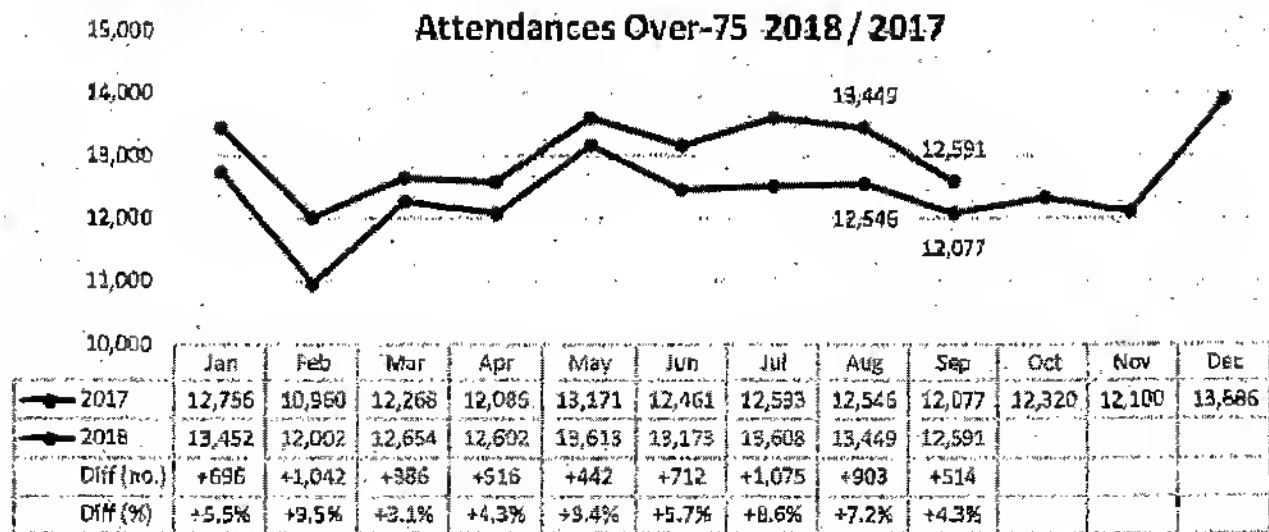
- This year to date, there have been 962,842 attendances, 33,171 (+3.6%) more than the same period last year (929,671).
- There were 105,820 ED attendances in September 2018, 1,537 (-1.4%) fewer than the previous month (107,357), and 2,301 (+2.2%) more than the same month last year (103,519).



Attendances and admissions exclude Navan.

3. ED Attendances of Over-75s

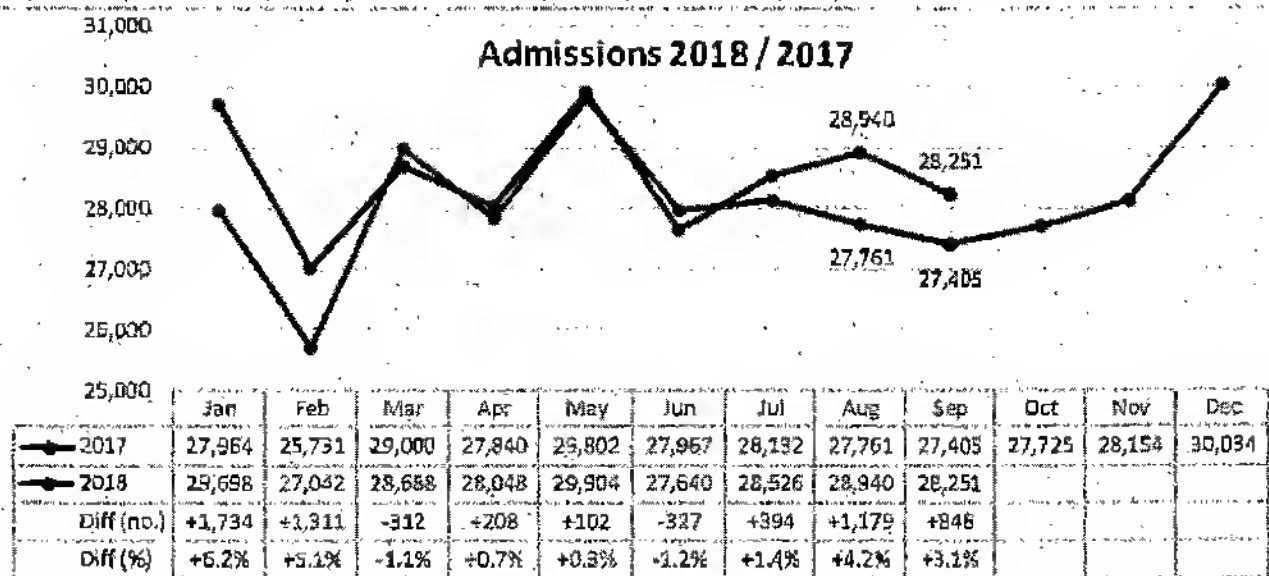
- This year to date, there have been 117,130 attendances of patients over 75, which was 6,272 (+5.7%) more than the same period last year (110,858).
- There were 12,591 ED attendances of patients over 75 in September 2018 (12.2% of all ED attendances), which was 858 (-6.4%) fewer than the previous month (13,449), and 514 (+4.3%) more than the same month last year (12,077).



Attendances and admissions exclude Navan.

4. ED Admissions

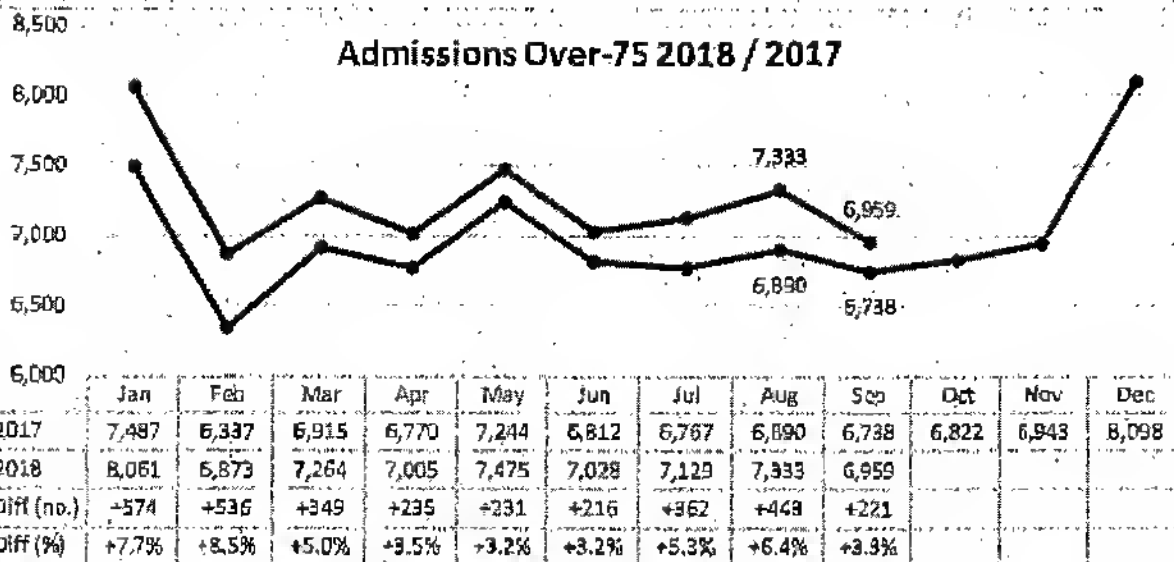
- This year to date, there have been 256,730 admissions, 5,128 (+2.0%) more than the same period last year (251,602).
- There were 28,251 ED admissions in September 2018, 689 (-2.4%) fewer than the previous month (28,940), and 846 (-3.1%) fewer than September 2017 (27,405).



Attendances and admissions exclude Navan.

5. ED Admissions of Over-75s

- This year to date, there have been 65,125 admissions of patients over 75, 3,165 (+5.1%) more than the same period last year (61,960).
- There were 6,959 ED admissions of patients over 75 in September 2018 (25.4% of all ED admissions), 374 (-5.1%) fewer than the previous month (7,333), and 221 (+3.3%) more than the same month last year (6,738).



Attendances and admissions exclude Navan.

6. Delayed Discharges (DDs)

- There was a daily average of 605 delayed discharges in September 2018, which was 11 (-1.9%) fewer than the previous month (594).

7. Actions underway to tackle overcrowding in hospital Emergency Departments

- The Department is working closely with the HSE to ensure the most effective response to the winter challenges to unscheduled care provision, and we expect to receive the Winter Plan for 2018/19 on 9 November.
- €10m in funding has been allocated in 2018 primarily for provision of supports to get patients home from hospital, where appropriate, before the end of the year, with a focus on supporting patients in the over 75 age group. The core objective of this measure is to ease congestion in hospitals as far as possible before the end of the year, to prepare for the expected peak in demand in the New Year.
- The Minister has requested the HSE to ensure that activity in 2019 is planned to manage critical demand pressures, most particularly in respect of increased attendance at emergency departments. This planning will include activity in hospitals, primary care and community care.
- Increasing capacity is a priority for the Government. Over the past 12 months, an additional 240 beds have been opened and a further 79 additional beds are planned for Quarter 4 2018 and early 2019.
- This includes an additional 30-bed ward in Our Lady of Lourdes Drogheda, a 40-bed modular ward block in South Tipperary General Hospital, and four high dependency beds in the Mater and Cork

University Hospital respectively. In addition, the new ED planned for Our Lady of Lourdes Drogheda is due to open early in 2019.

- A further €10 million will be invested next year to enable additional beds to be opened to alleviate pressure on Emergency Departments for Winter 2019/20 and the years ahead, on foot of the recommendations in the Health Service Capacity Review.
- The Department is currently in discussion with the HSE, in the context of the National Service Plan 2019, to identify the sites for investment and the associated number of beds, as part of an agreed capacity programme for 2019.
- The selection and opening of beds in specific sites in 2019 and future years will be considered as part of the annual estimates and service planning process, and subject to financial, operational, human resource and policy considerations and priorities.

APPENDIX

Table 1 – National ED Performance September 2018 vs August 2018 and September 2017

	2018 September			2018 August				2017 September				2017 September YTD		
	#	YTD	Daily Avg	#	# Change	% Change	Daily Avg	#	# Change	% Change	Daily Avg	#	# Change	% Change
8aM Trolleys	7,319	75,521	244	6,919	400	+5.8%	223	7,674	-355	-4.6%	256	72,125	3,396	+4.7%
Attendances	105,820	962,842	3,527	107,357	1,537	-1.4%	3,463	103,519	2,301	+2.2%	3,451	929,671	33,171	+3.6%
Attendances >75	12,591	117,130	420	13,449	-858	-6.4%	434	12,077	514	+4.3%	403	110,858	6,272	+5.7%
Admissions	28,251	256,730	942	28,940	-689	-2.4%	934	27,405	846	+3.1%	914	251,602	5,128	+2.0%
Admissions >75	6,959	65,125	232	7,333	-374	-5.1%	237	6,738	221	+3.3%	225	61,960	3,165	+5.1%
Conversion Rate	26.7%	26.7%		27.0%		-0.3%		26.5%		+0.2%		27.1%		-0.4%
Conversion >75	55.3%	55.6%		54.5%		+0.7%		55.8%		-0.5%		55.9%		-0.3%
DD Average	605			594	11	+1.9%								



Fw: FOI: Fw: Lessons Learned
Susan Scally to: Léa Valance
Cc: Aisling McQuaid

10/12/2018 13:19

----- Forwarded by Susan Scally/SLAINTE on 10/12/2018 12:55 -----

From: "Rothwell, Grace"
To: "Susan Scally"
Cc: "Paul Bolger"
Date: 02/11/2018
Subject: RE: Lessons Learned

Susan,

Just following up re EDs with < 2 Consultants in Emergency Medicine, same are Wexford, Navan and Tipperary. (based on best available data from EMP)

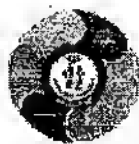
In addition, whilst there may be > 2 WTEs listed as attached to specific sites you have to bear in mind that these WTEs also reflect sessional commitments from larger to smaller EDs, see the following examples:

- In CUH, emergency medicine consultants provide cover to Mercy University Hospital, Mercy Urgent Care Centre, Gurrabraher and the Injury Units in Bantry and Mallow.
- UHL sessions to Ennis and Nenagh
- OLOL to Navan and Louth
- UHW to STGH, SLK and WGH
- UCHG to Roscommon and Portlucula
- SVUH to St. Michael's and Loughlinstown
- MMUH to Smithfield

The above is of concern as are those EDs that do not have 24/7 on-call availability of Consultants in Emergency Medicine given the low WTE.

Hoping that makes sense.

Grace Rothwell
 Head of the SDU
 Acute Hospitals Division
 Health Service Executive
 St. Canice's Building
 Dublin Road Kilkenny



Building a Better Health Service

CARE COMPASSION TRUST LEARNING



From: Susan Scally [REDACTED]
Sent: 01 November 2018 12:19
To: Rothwell, Grace
Cc: Paul Bolger [REDACTED]
Subject: Re: Lessons Learned

Grace,

The Department is generally in agreement with the conclusions and the commitment to include targets is welcome.

A general feedback is that winter funding has become the winter plan and that preparations are put on hold until certainty on Winter funding is provided. Firstly, the focus on incremental winter funding appears to act as a barrier to reform. For example, the FITT teams are identified as working, yet the HSE is not prioritising the roll-out from within existing funding levels. Secondly, the HSE Service Plan should plan services for the full 12 months, taking account of known increases in demand in Q1 and Q4 each year and the need to provide increased activity to meet the demand - particularly in Acute and Social Care. The National Service Plan for 2019 should make specific provision for Winter with no expectation that new funding over and above that allocated in the Estimates becoming available.

A second point of feedback relates to the availability of senior decision makers in the community and up the house in hospitals at weekend and outside normal working hours. This appeared to be a challenge last year with congestion building at weekends and lasting into the early part of the following week.

A third point is the reference to a number of ED's without 2 consultants. We would be grateful for information on which EDs are affected.

Regards,

Susan

Susan Scally | Principal Officer | Scheduled & Unscheduled Care Performance Unit
Department of Health | Hawkins House | Hawkins Street | Dublin D02 VW90

From: "Rothwell, Grace" [REDACTED]
To: "susan.scally" [REDACTED]
Date: 01/11/2018 11:37
Subject: Lessons Learned

Susan,

As discussed can you confirm that you are happy for me to finalise and issue this report given that we are now in November.

Thanks

Grace Rothwell

Head of the SDU

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Fw: FOI: Fw: Re: Winter Planning - PL SEE FROM MINISTER
Susan Scally to: Léa Valance
 Cc: Aisling McQuaid

10/12/2018 13:20

----- Forwarded by Susan Scally/SLAINTE on 10/12/2018 12:51 -----

From: Susan Scally/SLAINTE
To: Paula Smeaton/SLAINTE@SLAINTE
Cc: Greg Dempsey/SLAINTE@SLAINTE, Scheduled & Unscheduled Care performance Unit, Joanne Loneragan/SLAINTE@SLAINTE, Sarah Bardon/SLAINTE@SLAINTE, Anraid Dunne/SLAINTE@SLAINTE, Colm Desmond/SLAINTE@SLAINTE
Date: 05/11/2018 13:44
Subject: Fw: Re: Winter Planning - PL SEE FROM MINISTER

Paula,

I would be grateful if you would bring the attached reply to the Minister's email of 2 November to his attention.

Minister,

1. Following on from correspondence of 6 September from Greg Dempsey to the HSE, Paul Bolger, wrote to Anne O'Connor, Deputy Director General of Operations on 19 October to request receipt of the consolidated plan no later than 9 November 2018. Ms O'Connor acknowledged receipt of letter on 26 October and indicated that the consolidated plan would be ready for submission to DoH by Friday, 9 November. I have been liaising with Grace Rothwell in relation to the matter and have asked her to ensure that we receive the winter plan as early as possible on Friday so that the Minister has sight of the plan before the weekend.

[REDACTED]

4. The Department has been advised by the HSE that the 79 beds will be

delivered early in 2019 and will be factored into planning for 2019. We will be raising the provision of these beds in our discussions with the HSE on NSP 2019.

[REDACTED]

Susan Scally, PO
Scheduled and Unscheduled Care Performance Unit

5 November 2018

Paula Smeaton --- Winter Planning - PL SEE FROM MINISTER ---

From: "Paula Smeaton" [REDACTED]
To: "Paul Bolger" [REDACTED], <[REDACTED]> <Scheduled & Unscheduled Care performance Unit>
Date: Fri, 2 Nov 2018 1:17 PM
Subject: Winter Planning - PL SEE FROM MINISTER

Paul, Susan, Mary

See content of email relevant to your Unit that I received from Minister this am - can you pl ensure that these points are all addressed ?

Winter Planning

- Need to receive submission next week to press "go" on winter plans with additional social care services quickly coming on stream.

[REDACTED]

[REDACTED]

[REDACTED]

Thanks

Paula Smeaton
Private Secretary to Minister Simon Harris T.D.

An Roinn Stáinta
Department of Health

Block 1, Plaza Mispach, 50 - 58 Sráid Bhagóid Iochtarach, Baile Átha Cliath, D02 XW14
Block 1, Mesian Plaza, 50 - 58 Lower Beggot Street, Dublin, D02 XW14


health.gov.ie



Fw: Internal Communications Protocol
Susan Scally to: Léa Valance
Cc: Aisling McQuaid

10/12/2018 13:21

----- Forwarded by Susan Scally/SLAINTE on 10/12/2018 12:49 -----

From: Susan Scally/SLAINTE
To: Rothwell, Grace
Cc: Paul Bolger/SLAINTE
Date: 02/11/2018 17:16
Subject: Internal Communications Protocol

Grace,

Further to our conversation earlier, I would be grateful if you would send me an advance copy of the draft communications protocol currently in preparation by lunch time Monday if possible, so we can input and potentially agree the main elements of the protocol - before the Winter Plan comes in. This is in line with what was discussed at the recent Unscheduled Care Ministerial Governance meeting.

Separately, I will be sending an email to Paul Connors to agree an approach to external communications with the public and media during the trolley season. We're hoping to organise a telecon on Thursday next to involve Paul Connors, Anne Martin and yourself - and on our side, Paul B, myself and possibly someone from our own Press Office.

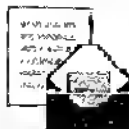
Have a good weekend.

Talk to you on Monday.

Regards,

Susan

Susan Scally | Principal Officer | Scheduled & Unscheduled Care Performance Unit
 Department of Health | Hawkins House | Hawkins Street | Dublin D02 YW90



Fw: Draft Performance Monitoring & Communications Protocol for Winter

2018 / 2019

Susan Scally to: Léa Valence

Cc: Aisling McQuaid

10/12/2018 13:18

— Forwarded by Susan Scally/SLAINTE on 10/12/2018 12:56 —

From: "Rothwell, Grace" [REDACTED]
To: "Susan Scally" [REDACTED]
Cc: "JOE RYAN" [REDACTED]
Date: 06/11/2018 11:42
Subject: Re: Draft Performance Monitoring & Communications Protocol for Winter 2018 / 2019

Dear Susan,

Please accept the current Draft version of the HSE's USC Performance Monitoring & Communications Protocol for your review and feedback as the DoH Lead for same. We might have opportunity to discuss tomorrow.

Please note that this document is not for circulation at this time as it remains a draft document and for approval by our colleagues once in final draft format.

Thanking you.

Grace Rothwell
Head of the SDU
Acute Hospitals Division
Health Service Executive
Room 236 St. Canice's Building
Dublin Road Kilkenny



Building a Better Health Service

CARE COMPASSION TRUST LEARNING



Draft 5 USC Monitoring and Communication Protocol for Winter 2018 2019 06.11.18 gr.docx [Section 29(1)]



FOI: Fw: Re:HSE Winter Plan 2018/2019
Susan Scally to: Léa Valance
Cc: Aisling McQuaid

10/12/2018 13:13

Susan

Susan Scally | Principal Officer | Scheduled & Unscheduled Care Performance Unit
Department of Health | Hawkins House | Hawkins Street | Dublin D02 VW90

[REDACTED]

SLAINTE on 10/12/2018 13:13 —

From: Paul Bolger/SLAINTE
To: "DDG Operations" <ddg.operations@hse.ie>
Cc: [REDACTED]@slainte, Susan Scally/SLAINTE@slainte, "Grace Rothwell"
Date: 10/12/18 13:13
Subject: Re:HSE Winter Plan 2018/2019

Anne

Many thanks for correspondence below and we will review the plan as a matter of urgency.

To assist this process, and in light of the early receipt of the plan and need for decisions on next steps, I would propose a teleconference in the morning to discuss the plan and the rationale behind the measures and the individual sites/groups chosen under the different options.

I would also be interested in understanding the forecast demand for services over the period, and, under each option the projected performance targets including weekly trolley numbers by hospital group, PET for over 75's and delayed discharges over the period.

I would propose a call for 11am, if suitable?

Kind regards

Paul

Sent from IBM Notes Traveler

DDG Operations --- HSE Winter Plan 2018/2019 ---

From: "DDG Operations" <ddg.operations@hse.ie>
To: "Greg Dem..." [REDACTED]
Cc: [REDACTED]
Date: Thu, 8 Nov 2018 6:35 PM
Subject: HSE Winter Plan 2018/2019

Dear Greg

Further to previous discussion, please find attached the HSE Winter Plan 2018/2019 for your attention. Early acknowledgement of the Plan would be appreciated given our urgent need to progress the agreed actions.

Regards,

Anne O'Connor

Leas-Stiúrthóir Ginearálta - Príomhfheidhmeannach Oibríochtaí Oifigeach | Seomra 1.38 | Ospidéal an Dr. Steevens | Baile Átha Cliath 8 | D08 W2A8 |
Deputy Director General - Chief Operations Officer | Room 1.38 | Dr. Steevens' Hospital | Dublin 8 | D08 W2A8 |

Tel: 01 [REDACTED]
Email: operations@hse.ie

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Má fuair tú an ríomhphost seo trí dheanmhad, bheadh muid buíoch dá gcuirfeá in iúl don Deasc Seirbhíse ECT ar an nguthán ag [+353 818 300300](tel:+353818300300) nó ar an ríomhphost chuig service.desk@hse.ie agus ansin glan an ríomhphost seo dá d'chóras."

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HSE Winter Plan 2018 / 2019

8th of November, 2018



Medical Specialist Services
Special Delivery Unit

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1.0 Introduction

Winter planning is a core component of annual planning in the health service and is required to ensure that the system is prepared for the additional external pressures associated with the winter period.

While the system now experiences high demand on a year round basis, there is a more intense peak during the winter period, with a particular challenge in the period immediately post Christmas and into the New Year. A prolonged holiday period, increased presentations of older persons, severe winter weather, seasonal influenza and the spread of norovirus and other health care associated infections are examples of such pressures that increase during this period.

Following on from winter planning discussions last year the HSE developed a 3 Year Plan for Unscheduled Care, which comprised two parts, Part A. Capacity and Part B. Improvement.

Part A., the Capacity Proposal, was submitted to the Department of Health in June of this year. This proposal set out comprehensive proposals for additional acute and community capacity over the 3 year period 2018 – 2020, with the 2018 component viewed as additional capacity for winter 2018 / 2019.

This early submission was in response to the recognised need for additional beds in the system as identified in the Health Service Capacity Review 2018, which concluded, amongst other key findings, that there was a need for an immediate injection of 1,260 beds in the system. Funding has not yet been allocated to the HSE for the Capacity Proposal.

In respect of Part B. Improvement the HSE has developed the 'Five Fundamentals Improvement Programme for Unscheduled Care'.

Central to this programme five core elements deemed to be the essentials in terms of optimal management of patient flow, namely:

1. Leadership and Governance
2. Operational Processes and Pathways pre Admission
3. Operational Processes and Pathways post Admission
4. Integrated Working
5. Data and Business Intelligence

The 'Five Fundamentals' as developed is reflective of national and international best practice and is similar to the 'Six Essential Actions' in NHS Scotland, an Improvement programme that has been in existence for over fifteen years and continues to be implemented.

As at the 7th of November 2018 the 'Five Fundamentals' has been developed, peer reviewed and piloted in the South South West Hospital Group and Cork Kerry Community Healthcare.

Arising from the work to date, Cork University Hospital, University Hospital Kerry and Mercy University Hospital each have completed their self-assessment and now have a Quality Improvement Plan for Unscheduled Care. Each site has identified improvements that require resource as well as some cost neutral improvements.

Funding has been allocated to the South South West Hospital Group and to Cork Kerry Community Healthcare for Quality Improvement and Data Analytics resource for the programme and the next steps will see progression of the Quality Improvement Plans in the pilot sites together with roll out to the remaining sites in the Hospital Group, namely University Hospital Waterford and South Tipperary General Hospital. It is also planned to commence roll-out to the Dublin Midland Hospital Group in Q1 2019.

Implementation of improvement programmes takes consistent focus over an extended period to yield tangible results. This is the first ever national improvement programme for unscheduled care and the programme will require significant support to enable sustained improvement in flow. It is further recognised that 'improvement' and 'capacity' go hand in hand.

On the 19th of October 2018 the HSE was notified of an additional €10m in once-off funding via Supplementary Estimates to support the HSE plans to manage the known increase in demand that our health services will experience over the winter months.

In the context of this funding this document sets out the agreed approach for winter 2018 /2019 .

2.0 Context

Total population growth for 2018 – 2019 is projected to increase by 1% (n=50,463). During this period, adults aged 65 years and over are projected to increase by 3.3% (n=21,969) and adults aged 85 years and over are projected to increase by 4.3% (n=3,116). The 0-5 year age cohort is projected to fall by -1.8% (n=6,823) and the 18-64 year age cohort is expected to increase by 0.9% (n=25,303) in the same time period.

Total population growth for 2018 – 2021 is projected to increase by 3% (n=146,796). During this period, adults aged 65 years and over are projected to increase by 10.1% (n=68,462) and adults aged 85 years and over are projected to increase by 13.9% (n=10,064).

From 2018 – 2021 there is an annual increase of between 1.7-1.9% in adults aged 45-64 years, with adults aged 18-64 years in the same time period increasing annually from between 0.8-0.9%.

Our demographic profile has changed, our life expectancy has risen and premature mortality has reduced but there is greater prevalence of chronic conditions. Some 60% of those aged 50 years and over have at least one chronic condition.

Many of these conditions require preventative care and ongoing management, services that are generally provided closer to home, in the community. However, our system remains overly hospital-centric, with hospitals representing the first port of call for many patients, while community-based services are fragmented and underdeveloped. SlainteCare seeks to address a shift in the delivery of care to support a more community based service.

Services across all areas of our health system are stretched, with demand far outstripping supply. Hospitals are operating at maximum capacity, with occupancy rates across the country at 95% - 100% and wait times and hospital waiting lists under significant pressure.

Constraints are also evident in community-based services, with significant wait times for many primary care services and high levels of unmet need for homecare and other social care services.

References:

Planning for Health – Demographic Cost Pressure on Public Health Services Estimates Paper 2018-2019, July 2018
Slaintecare Implementation Strategy and Next Steps Government of Ireland

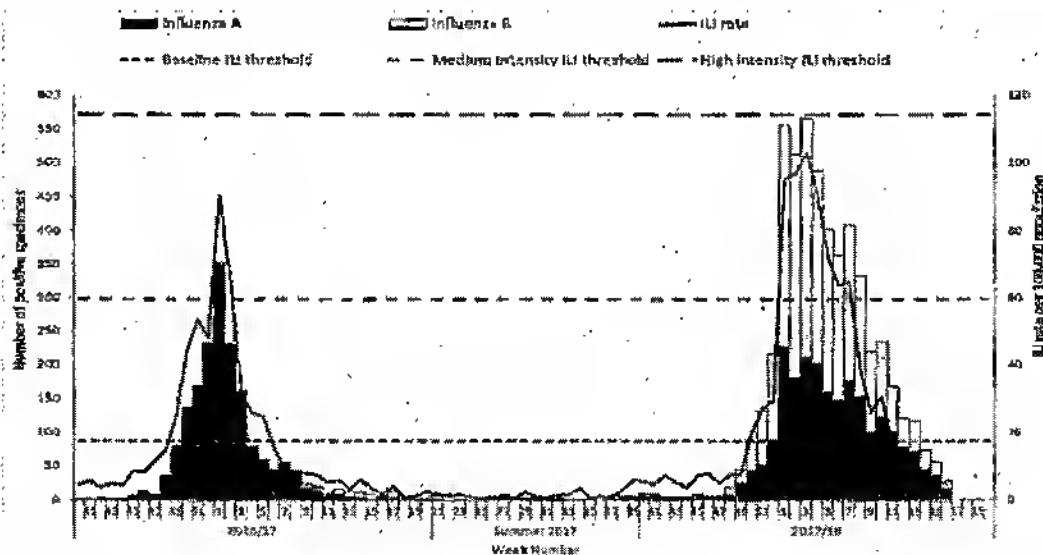
3.0 Winter 2017 / 2018 (October 2017 – March 2018)

€40m in additional funding was provided to the HSE for Winter 2017/2018. The aim of the associated Winter Plan was to provide additional support through the provision of specific funded measures to alleviate the anticipated surge in activity that is experienced during winter.

The plan contained a number of measures including additional acute capacity, and measures to expedite discharges from the acute setting. It was implemented through a specific and detailed planning process implemented in Hospital Groups and Community Healthcare Organisations across the country.

Two extreme weather events occurred during Winter 2017 / 2018, namely 'Storm Ophelia' and 'Storm Emma'. The severity of such storms and their effects on the Healthcare system were profound. Such weather events greatly exaggerate congestion in the hospital system due to an inability to discharge patients during times of 'Red' weather warnings and a subsequent sharp influx of post-storm presentations on an already congested system. In spite of the commendable work of healthcare staff, particularly those working in front line services, the resultant system pressures required an extended recovery period, which included the cancellation of scheduled procedures to enable the system to return to normal daily operations.

Seasonal influenza during Winter 2017 / 2018 was at its highest level since the 2011/2012 season. This was further compounded by a prolonged season, and the prevalence of influenza 'Type B' which typically results in more hospitalisations than 'Type A' influenza. This resulted in peak influenza like illness rates exceeding 100 per 100,000 population during the 2017/2018 season (90 per 100,000 during 2016/2017). Furthermore, there were 4,650 confirmed influenza hospitalisation cases notified during the 2017/2018 season compared to 1,425 in the previous year.



It is clear that had the winter measures not been introduced the situation across our services could have been much worse given the unique pressures experienced.

4.0 Overview Key Activity Metrics - Winter 2017 / 2018



5.0 Approach for Winter 2018 / 2019

In line with current governance arrangements, all winter related issues and actions will be managed by the Senior Operations Team which comprises the Deputy Director General for Operations, the National Director for Acute Operations, the National Director for Community Operations and the National Director for National Services.

Request for Winter Plans

Following on from the detailed Capacity Proposal as submitted to the Department of Health in June 2018, singular integrated winter plans were requested from Hospital Groups and Community Health Organisations.

In terms of winter preparedness, Hospital Groups and Community Healthcare Organisations were asked to collaborate and develop an integrated winter plan for the period October 2018 – March 2019 to provide assurance that robust and integrated plans are in place at site, group and community levels.

Hospital Groups and Community Healthcare Organisations were asked, at a minimum, to reflect on the following core elements, and provide summary status of preparedness under each heading:

1. Planning and Escalation
2. Operational Management of Patient Flow
3. Maintaining Public Health

Planning and Escalation encompasses Escalation Plans, Surge Capacity, Integrated Cross-Divisional Activity Plans for Winter Months, Staffing Capacity Plans and Rosters, Dealing with the Impact of Severe Weather and Agreed Weekly Egress Requirements.

Patient Flow Operations Management addresses Leadership and Governance, Use of Data and Information to Measure and Monitor Performance, Engagement and Integrated Planning across all services and Operational Processes and Pathways.

Maintaining Public Health includes Effective Preparation for Seasonal Influenza and Effective Preparation for Norovirus and other Healthcare Associated Illnesses.

Review of Winter Plans

Integrated Plans were received from all Hospital Groups and Community Healthcare Organisations.

These plans were initially reviewed by the Special Delivery Unit with clarifications and amendments / additionality sought as appropriate.

Review sessions were then undertaken to formally assess the winter plan against the guidance issued and to advise on the status of the Capacity Proposal and in turn discuss the proposed targets, given that they were based on Capacity Proposal assumptions.

Each Hospital Group CEO and the associated CHO Chief Officer(s) was allocated 90 minutes for the review, with same undertaken by the Senior Operations Management Team together with senior staff from the Operations Division and from the Planning and Strategy Division.

The final formal review meeting was completed on Thursday 11th of October, 2018.

Given the absence of clarity in relation to additional funding for capacity and / or winter proposals, in advance of the formal review sessions, the HSE was unable to confirm additional funding and proposed improvement targets at these sessions.

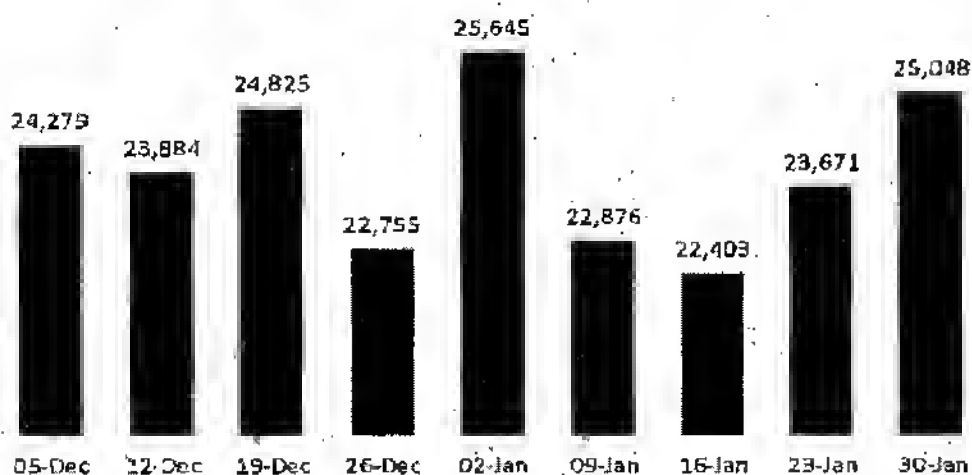
National Winter Planning Meetings

In parallel to the planning and preparedness at local level, national weekly meetings, convened by the Deputy Director General Operations are ongoing, focussing on proposed intensive management and monitoring arrangements for this winter.

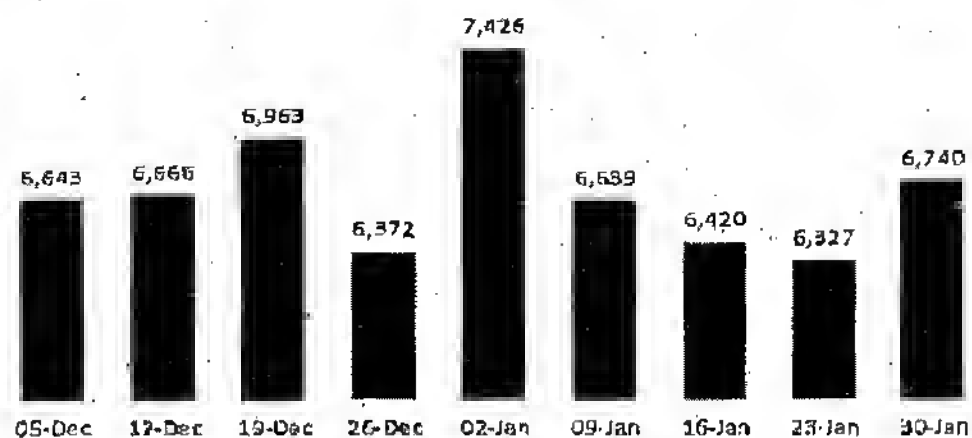
Analysis Winter 2017 / 2018

The national team has undertaken detailed analysis of Winter 2017 / 2018, and prior years which confirms a common pattern of activity with pressure building in the system in advance of Christmas. This is by significant reduction in activity, and then significant increase in activity after St. Stephen's Day, with attendances and admissions then reducing before steadily rising towards the end of January. Key activity for Winter 2017 / 2018 is represented graphically below:

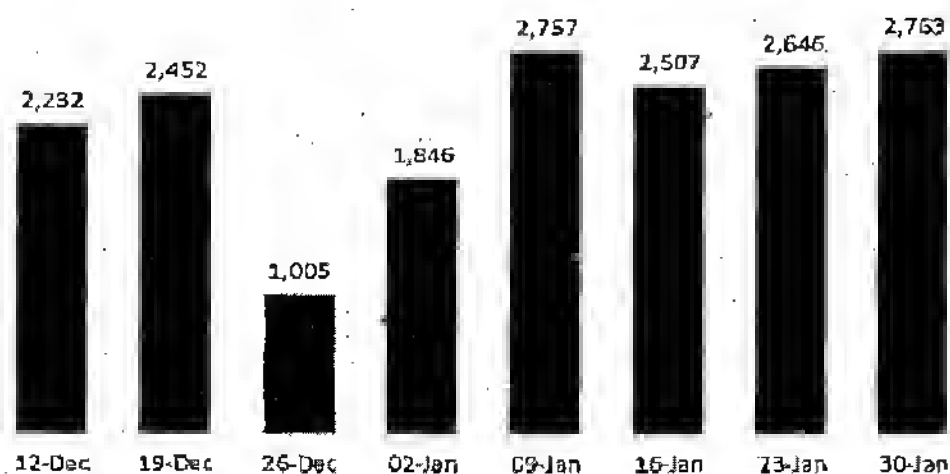
ED Attends - National Total (2017/2018)



ED Admits - National Total (2017/2018)



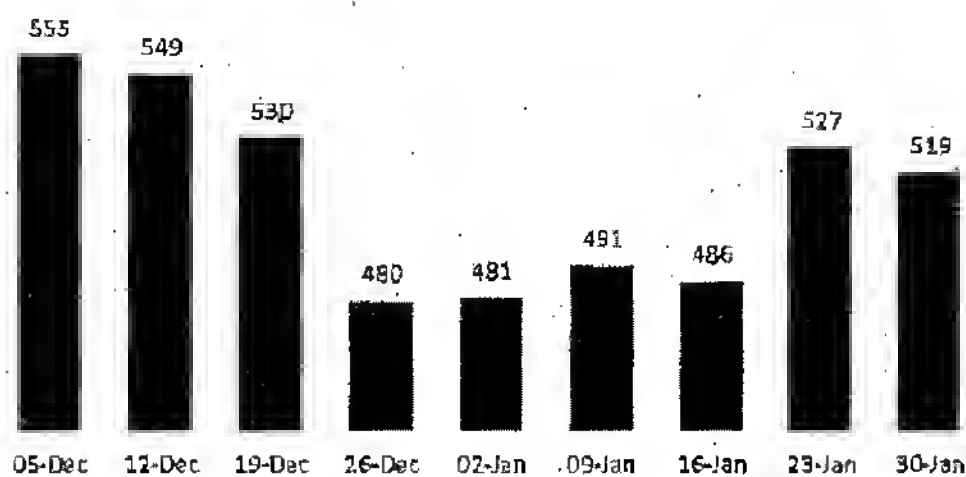
Trolley Count (Daily Avg.) - National Total (2017/2018)



In respect of Delayed Discharges, the 2017 / 2018 analysis also reflects a reduction in advance of Christmas followed by a steady rise to the end of January. This is reflective of the increase in older persons presenting to Emergency Departments, and requiring community supports on discharge from the acute setting.

Of concern in November 2018, is that the current level of Delayed Discharges is already at a higher level than that of December 2017, with Home Support recognised as a significant challenge.

Delayed Discharges - National Total (2017/2018)



Key Sites of Concern

9 sites, on the basis of trolley performance in recent winters together with performance year to date have been identified as key sites of concern for Winter 2018 / 2019:

- Mater Misericordiae University Hospital
- St. Vincent's University Hospital
- Tallaght University Hospital
- Naas General Hospital
- Midland Regional Hospital Tullamore
- Galway University Hospital
- University of Limerick Hospital
- Cork University Hospital
- University Hospital Waterford

ED attendances at these high trolley sites have been analysed by referral type. The analysis identifies 'GP' and 'Self' as the high volume referral paths, and identifies that the majority of ED Attendances for this time period were triaged as either category 2 or 3.

6.0 Winter 2018 / 2019 – A Different Approach !

The 12 Priorities for Winter 2018 / 2019 are agreed as:

1. Ensuring integrated working between acute hospitals and the community over the winter period to ensure optimisation and alignment of existing resources and pathways.
2. Ensuring robust integrated preparedness plans encompassing all agreed arrangements in respect of Planning and Escalation, Operational Management of Patient Flow and Maintaining Public Health.
3. Ensuring de-escalation pre the Christmas period, to include a reduction in Delayed Discharges, closure of surge capacity and of inpatient beds, a reduction in Outpatient and Elective activity for the period, additional diagnostic capacity to ensure optimal patient processing and a review of all inpatients to ensure PDDs are in place to support discharging over the holiday period.
4. Awareness of GP and GP out of hours arrangements and ensuring agreed working arrangements for the holiday period.
5. Awareness of Nursing Homes arrangements and ensuring agreed working arrangements for the holiday period.
6. Ensuring availability of staffed acute and community bed capacity for 1st of January 2019
7. A focus on ambulatory patients that present to Emergency Departments either as GP or Self Referrals by the establishment of alternative streaming options / pathways of care.
8. A focus on older and at risk patients in the community to support them at home and a focus on reablement and home support for those discharged from acute and community settings
9. A focus on admission avoidance / alternatives to admission, Rapid Access Clinics, consideration of Discharge to Assess models, use of community facilities as appropriate and a focus at community level on better supporting the acute hospital system.
10. A focus on implementation of the SAFER bundle in acute hospitals (wards and clinical support services) to ensure a Plan for Every Patient, GREEN days and early and 7 day discharging.
11. Ensuring a robust communications campaign.
12. Ensuring a robust influenza campaign.

7.0 How will we deliver on our Winter Plan ?

Integrated Preparedness Plans

Integrated preparedness plans as submitted by Hospital Groups and Community Healthcare Organisations have been approved. These plans confirm preparedness in respect of Planning and Escalation, Operational Management of Patient Flow and Maintaining Public Health, at site, group and community levels.

Planning is ongoing in November to finalise arrangements with local teams in respect of readiness and availability of aids and appliances and home support etc. with a view to active implementation of the winter plan from the 1st of December 2018.

Cross-Divisional Senior Operations Management Team Leadership and Oversight

Weekly meetings are in place chaired by the Deputy Director General – Operations. Members of the Senior Operations Management Team, together with additional senior colleagues will comprise a daily rota for the period 1st of December, 2018 – 31st of March 2019 with a named individual identified as the Daily Lead for Winter. This Daily Lead will be the singular point of contact for any urgent issues arising out of hours and at weekends.

In addition, the HSE will have a rota identifying Senior Clinical and Non-Clinical staff as the Daily Media Spokesperson for the HSE.

Daily and Weekly Performance Monitoring, Reporting and Communications

A National Performance Monitoring and Communications Protocol is being developed in partnership with the Department of Health. This Protocol sets out the agreed arrangements for this winter in terms of daily monitoring and reporting arrangements in place, and arrangements for when the system is in escalation.

In addition to the aforementioned, which encompasses the period from the 1st of December to the 31st of March, and in recognition of the significant challenges for this winter, the HSE is also planning a 4 week Enhanced Focus Period from the 17th of December 2018 – 13th of January 2019.

Focus Period - 17th of December 2018 – 13th of January 2019.

Arising from the learning associated with previous winters as well as from the Papal Visit, a need for a 4 week enhanced focus period pre and post Christmas has been identified. This period will run from Monday 17th of December 2018 to Sunday 13th of January 2019.

This Focus Period will see a suite of enhanced measures targeted at the 9 identified sites and their associated community healthcare organisations for the period 17th of December to the 13th of January inclusive.

Improved integrated working and enhanced community supports are central to the Focus Period. Planning is ongoing and a National Framework is in place.

At a high level, the enhanced actions are as follows:

1. The establishment of 'Winter Ready' Clinics in the Community – these clinics would be targeted at at-risk groups, i.e. older persons and persons with chronic disease, they would be available from early December offering a range of services including flu vaccine, winter ready advice and routine health checks.
2. Extended opening hours, and expanded services for Local Injury Units, Minor Injury Units and key Primary Care Centres – In looking to reduce those presenting to Emergency Departments it is intended to extend the opening hours in alternative settings where possible and also to expand the range of services available where possible, i.e. diagnostics.
3. Increasing Diagnostic access for GPs and extending hours of service in acute hospitals – in looking to reduce those presenting to Emergency Departments it is intended to increase access to diagnostics for GPs where possible as a means to potentially reducing admissions.
4. Arrangements with Private Providers in terms of access to diagnostics and access to inpatient beds for post trauma surgery patients and for stepdown patients – discussions are underway with private providers at national level in relation to diagnostic and capacity support. Increasing access to diagnostics for scheduled or unscheduled patients will have a positive impact on flow in our hospitals, and given our capacity challenge, securing additional capacity from the private sector would potentially support some of the larger urban sites. Based on previous experience it is accepted that the private sector can best support us in capacity terms for post trauma surgical patients and stepdown patients.
5. Enhanced Senior Decision Making presence at the front door and in AMAUs with corresponding enhanced arrangements in Diagnostics (Radiology & Cardiology) – to support admission avoidance and an overall reduction in admissions, the HSE is seeking to enhance senior decision making presence at the 'front door'.

6. The provision of Frailty Intervention Team (FIT) in Emergency Departments or in Community facilities has been identified as a key support for this winter. It was equally identified at the recent Unscheduled Care Forum as an enabler to flow. Effective FIT teams impact positively on admissions and support the principle of 'keeping patients well at home'.
7. Curtailment of outpatient, elective inpatient and day case, and routine community activity – in order to create additional 'capacity' for unscheduled care, the HSE is examining options to curtail scheduled / routine activity over the focus period.
8. Curtailment of 'scheduled' diagnostics to create capacity for 'unscheduled' diagnostics – the curtailment of associated diagnostics will create additional capacity for 'unscheduled' demand.
9. The scheduling of additional emergency theatre lists is being examined as a planned action over the focus period, it is proven that early access to theatre impacts positively on length of stay.
10. Enhanced Senior Decision Making presence at ward level / specialty consults to support improved flow.
11. Reducing surgical inpatient capacity to enable medical short stay – if sites can reduce surgical inpatient capacity for a period to enable medical short stay, i.e. < 48hrs, this can positively impact on available capacity.
12. Redeployment of staff from 'scheduled' activity – curtailment of scheduled activity provides potential for redeployment of staff to support unscheduled demand.
13. The assignment of a staff member to identify patients for CIT / OPAT – Having a person dedicated to finding patients suitable for CIT / OPAT is proven to be a powerful tool in optimising this resource for admission avoidance / early discharge.
14. The assignment of a staff member as Liaison for Nursing Homes – Having a person dedicated to liaising with Nursing Homes can support admission avoidance / ensure that the patient is seen in the right place, at the right time by the right healthcare practitioner.
15. Having a Community representative person on site in acute hospitals for the focus period is one the core actions for this winter. The HSE has identified ensuring integrated working between acute hospitals and the community over the winter period as a key priority. Having a community representative on-site will ensure prompt streaming / referral as appropriate and will equally support safe and timely discharge where community supports are required.
16. Having daily visibility of all available capacity in Model 2 sites and in the community was identified as a key support for this winter and same is being actioned.
17. Increased provision of HSP, TCB, CIT, OPAT etc was highlighted by all Hospital Groups and Community Healthcare Organisations for this winter given the ever increasing demand. Increasing this provision is contingent on additional resource being allocated, all options continue to be explored.

18. Ensuring effective transport via NAS – NAS as part of the weekly Planning Forum have reviewed transport detail from previous winters and are actively working with sites to ensure advance booking of transport where possible, this action is key to ensure safe and timely discharge from the acute setting.
19. Optimising the use of Day Hospitals – for patients in the community the local Day Hospital is often key to their health and well-being at home and options are being explored to maintain Day Hospital service over the Christmas and New Year period.
20. Optimising PHN engagement to maintain patients in the community – again for patients in the community this is an essential resource and from an acute hospital perspective the PHN is key to knowing whether a patient can be discharged with supports.
21. Optimising HSCP engagement to maintain patients in the community and / or facilitate early discharge – similar to the previous action HSCP involvement with patients in the community can make the difference between maintaining patients at home or admitting them to an acute facility. In addition having HSCP involvement with patients post discharge can enhance the discharge experience and positively impact on readmission rates.

The agreed governance and oversight for the Focus Period will see the establishment of a National Coordination Team as well as a number of Regional Coordination Teams who will monitor activity and performance at local level and communicate with the National Coordination Team in terms of intervention and support.

These teams will be located in community facilities throughout the country and will be supported by live dashboards for this period. These dashboards, supported by the Office of the Chief Information Officer (OoCIO), will display real-time data by site in terms of patients in the Emergency Department by category, Ambulances waiting and en route, PET times, discharges effected and underway, beds available etc. The dashboards will enable timely oversight at both regional and national levels.

The target date for completion and sign-off of all arrangements pertaining to the Focus Period and associated Coordination Teams is Friday 30th of November.

Public Campaigns

There are 4 campaigns planned for this winter, namely:

- Winter Wellness
- Flu Vaccine
- Under the Weather
- Promotion of Injury Units and best use of Emergency Departments

The 'Winter Wellness' campaign involves a simple umbrella design for all health messages this winter which will unify all the campaigns using a design to be shared on social media, digital platforms and on any and all press releases.

The annual 'Flu Vaccine' campaign seeks to further promote the uptake of flu vaccine among at-risk groups, of note is that this campaign has had significant positive impact over the last two winters with a notable increase in uptake. The campaign will include media relations, photo calls with the Minister, Health Care Workers leaflets and posters for at-risk groups. In addition promotional materials will be distributed to health facilities nationwide.

The 'Under the Weather' campaign, undertheweather.ie is an on-line companion through a range of common illnesses, helping people with advice and to get better at home without antibiotics. The campaign also includes planned media events, spokespersons for interviews as required, posters and leaflets and social media content.

The final aspect of the campaign involves promotion of our 11 Injury Units, raising awareness in the respective catchment areas of the range of care provided and to whom and details on opening hours etc., and in turn media relations featuring clinical spokespersons highlighting the services and delivering messages about Emergency Departments, how to prepare for a visit to the Emergency Department and what to expect when you present at an Emergency Department.

This latter campaign will work closely with the Patient Advocate Liaison Service to ensure that comfort and environmental factors are considered, and managed when Emergency Departments are overcrowded.

The HSE will be seeking to ensure that the environmental conditions in an overcrowded department are optimal. The HSE recognises that on occasion, patients awaiting admission to an inpatient bed can be on a trolley, or on a bed in a non-ward setting, for an extended period.

Winter planning this year recognises the need to ensure that patients awaiting admission to an inpatient bed have access to necessary comforts. Hospitals are required to ensure that all clinical and non-clinical areas are cleaned in accordance with a daily schedule and that additional services are provided at times of higher than normal demand.

The HSE's Winter Plan 2018 / 2019 comprises three interdependent components:

1. Preparedness across the full system for the period 1st of December 2018 to 31st of March 2019 – this is primarily linked to optimal use of existing resources.
2. A 4 week focus period of intense monitoring and oversight with a suite of enhanced measures in place targeted at the 9 identified sites of concern, to improve integrated working across acute and community services.
3. Enhanced Home Support and Inpatient Capacity, both dependent on additional funding.

Additional Funded Supports (Winter Initiative Funding)

The HSE in its Capacity submission in June 2018 identified the need for a range of additional capacity across acute and community services. Phase 1 of this proposal set out specific requirements in terms of winter 2018 / 2019.

In the absence of this Capacity Proposal being funded, the HSE has identified 3 options aimed at supporting service delivery in Winter 2018 / 2019.

Option 1 reflects the HSE's considered view as to the best deployment of the €10m in once-off funding allocated to support the HSE plans to manage the known increase in demand that our health services will experience over the winter months. This option provides for minimal enhancement of community supports, but does not provide for enhanced acute capacity.

Option 2 sets out the HSE's considered view in terms of optimal use of the €10m, plus an additional €5m to be potentially sourced through the NSP 2019 process (yet to be confirmed). This option provides for minimal enhanced community services along with minimal enhanced inpatient capacity.

Option 3 recognises the requirement to provide funding to support the transition of older patients from acute care to the most appropriate setting and equally to provide some additional capacity in acute hospitals. Option 3 is the HSE's preferred plan for Winter 2018 / 2019. Option 3 sets out the HSE's considered best deployment of the €10m, plus an additional €10m, should this be made available through the NSP 2019 planning process.

Whilst this is the preferred option of the HSE in terms of managing the surge in activity, it must be noted that given the current allocation for winter to the HSE is €10m, and as such the HSE has commenced the implementation of Option 1 pending the conclusion of NSP 2019 discussions.

8.0 Summary & Conclusion

Integrated Winter Preparedness Plans were submitted by Hospital Groups and Community Healthcare Organisations and have been approved by the Senior HSE Operations Management Team. These plans set out preparedness to meet the anticipated winter surge, and are reflective of the optimisation of existing resource in the context of:

1. Planning & Escalation
2. Operational Management of Patient Flow
3. Maintaining Public Health

This preparedness planning continues to the end of November to ensure readiness and availability of aids and appliances, home support providers etc., with agreed commencement of the Winter Plan from the 1st of December.

The second component of the Winter Plan is that of a 'Enhanced 4 Week Focus Period', which is based on the learning from previous winters together with the experiences of the recent Papal Visit, and is reflective of the stated priority to ensure improved integrated working between acute and community colleagues.

Given the current challenges and the increasing demand there was a significant ask from the system in terms of additional monies for winter to support a reduction in delayed discharges, to provide additional capacity (acute and community) and to effect alternative streams and pathways for this winter.

€10m has been allocated to support the predictable winter surge. Whilst this funding will support minimal enhancements to community services, it is unlikely to meet the inevitable need for enhanced community and acute services.

A 'Performance Monitoring and Communications Protocol' is being developed in partnership with the Department of Health to reflect the daily, weekly and monthly actions undertaken at both local and national level in the sphere of unscheduled care.

The HSE Senior Operations Management Team will monitor and report on the performance of all services throughout Winter 2018 / 2019 in line with this Protocol.

END



Fw: Minister and Sec Gen - meeting Taoiseach - Fri 9 Nov at 4pm in Mieslan Plaza
 Susan Scally to: Léa Valance
 Cc: Aisling McQuaid

10/12/2018 13:15

From: Paul Bolger/SLAINTE
To: Paula Smeaton/SLAINTE@SLAINTE, Susan Scally/SLAINTE@SLAINTE
Cc: Scheduled & Unscheduled Care performance Unit, Greg Dempsey/SLAINTE@SLAINTE
Date: 08/11/2018 18:28
Subject: Re: Minister and Sec Gen - meeting Taoiseach - Fri 9 Nov at 4pm in Mieslan Plaza



2018-11-08 Briefing Note for Minister on ED Performance - for meeting with Taoiseach and MinPER.docx

Paula

Brief for tomorrow's meeting - the HSE have not produced their winter plan yet.

I will update if required.

Regards

Paul

Paul Bolger
 Director Scheduled & Unscheduled Care Performance Unit

An Roinn Sláinte
 Department of Health

Block 1, Plaza Miesach, 50 - 58 Sráid Bhagóid Iochtarach, Baile Átha Cliath, D02 XW14
 Block 1, Mieslan Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14



Paula Smeaton

To: All The Minister and Sec Gen will be meeting...

08/11/2018 11:11:51

From: Paula Smeaton/SLAINTE
To: Laura Magahy/SLAINTE@SLAINTE, Paul Bolger/SLAINTE@SLAINTE, Scheduled & Unscheduled Care performance Unit, Teresa Cody/SLAINTE@SLAINTE, Sorcha Murray/SLAINTE@SLAINTE, Paddy Barrett/SLAINTE@SLAINTE, Colm Desmond/SLAINTE@SLAINTE, Aonraí Óunne/SLAINTE@SLAINTE, Aodan Mac an Mhúille/SLAINTE@SLAINTE, Fergal Goodman/SLAINTE@SLAINTE, Eugene Lennon/SLAINTE@SLAINTE, Sandra Walsh/SLAINTE@SLAINTE, Tracey Conroy/SLAINTE@SLAINTE, Joan Regan/SLAINTE@SLAINTE, Paul Flanagan/SLAINTE@SLAINTE, Greg Dempsey/SLAINTE@SLAINTE, Alessandro Fanlin/SLAINTE@SLAINTE, Martin Woods/SLAINTE@SLAINTE
Cc: Lisa Williamson/SLAINTE@SLAINTE, Joanne Lonergan/SLAINTE@SLAINTE, Sarah Bardot/SLAINTE@SLAINTE, Minister's Diary/SLAINTE@SLAINTE
Date: 08/11/2018 11:11
Subject: Minister and Sec Gen - meeting Taoiseach - Fri 9 Nov at 4pm in Mieslan Plaza

To: All

The Minister and Sec Gen will be meeting with the Taoiseach, on Fri 9 November at 4pm in Miesian Plaza.

The meeting includes discussion of:

Sláintecare
Winter
IR issue
Capital
GP Contract
NMH
NSP

Can you pl provide briefings on these topics for the Minister & Sec Gen.

Thanks

Paula Smeaton
Private Secretary to Minister Simon Harris T.D.

An Roinn Sláinte
Department of Health

Block 1, Plaza Miesach, 50 - 58 Sráid Bhagáid Íochtarach, Baile Átha Cliath, D02 XW14
Block 1, Miesian Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14


health.gov.ie

Briefing Note on ED Performance & Winter Planning

Summary

Year to date performance - 2018

- 75,521 8am trolleys, 3,396 (+4.7%) more than the same period last year
- 962,842 attendances, 33,171 (+3.6%) more than the same period last year
- 117,130 attendances of patients over 75, which was 6,272 (+5.7%) more than the same period last year
- 65,125 admissions of patients over 75, 3,165 (+5.1%) more than the same period last year

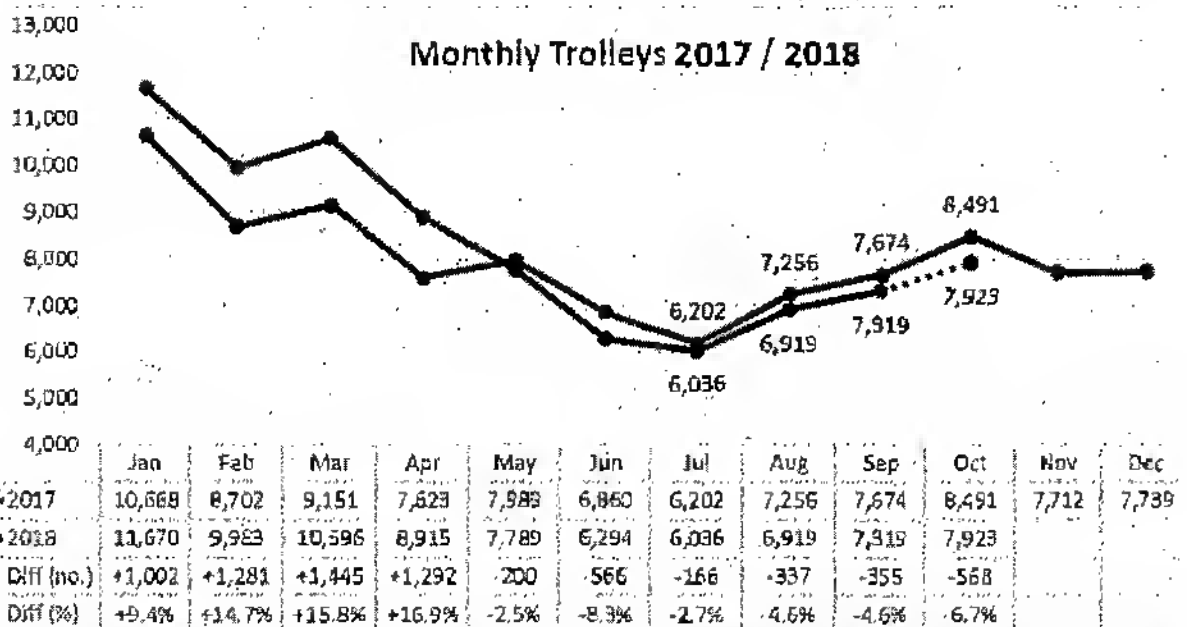
For the 12 months from start of October 2017 to end of September 2018:

- 99,463 8am Trolleys
- 1,280,182 attendances
- 342,643 admissions

Table 1 (Appendix) shows a summary of all ED performance metrics at the national level.

1. 8AM Trolleys – as measured by HSE TrolleyGAR (counted at 8AM each day)

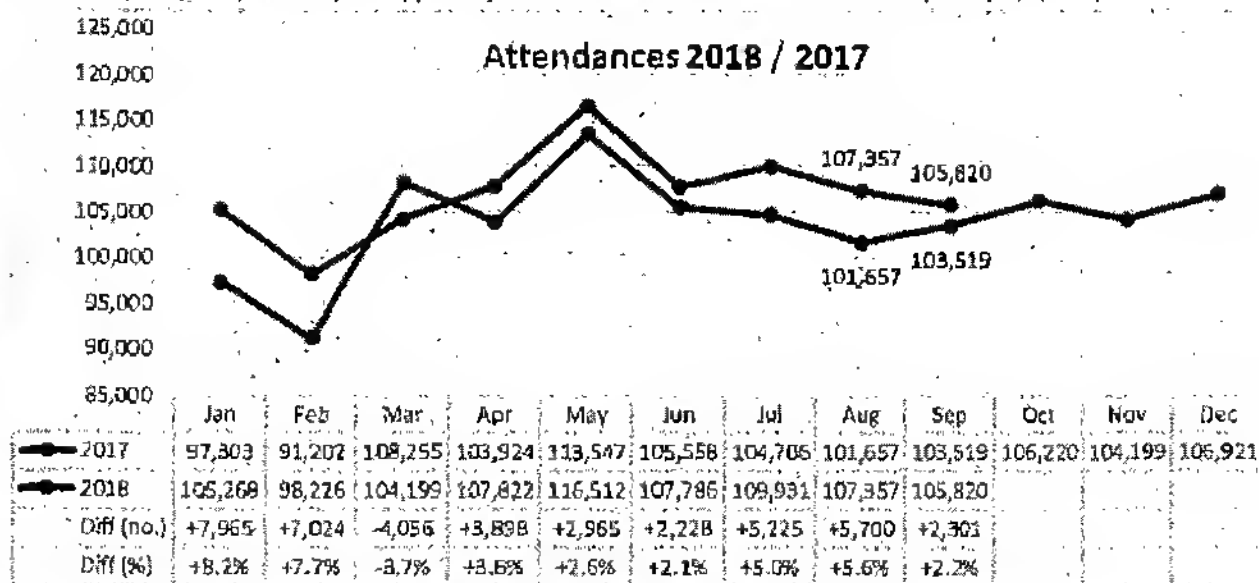
- This year to date, there have been 75,521 8AM trolleys, 3,396 (+4.7%) more than the same period last year (72,125).
- There were 7,319 8AM trolleys in September 2018, which was 400 (+5.8%) more than the previous month (6,919), and 355 (-4.6%) fewer than the same month last year (7,674).



Trolley data excludes Children's Hospital Group and St. Michael's. St Michael's hospital started reporting data consistently only from week 44 of 2017 onwards. Figure for October 2018 is provisional based on aggregate of daily HSE TrolleyGAR and is not validated.

2. ED Attendances

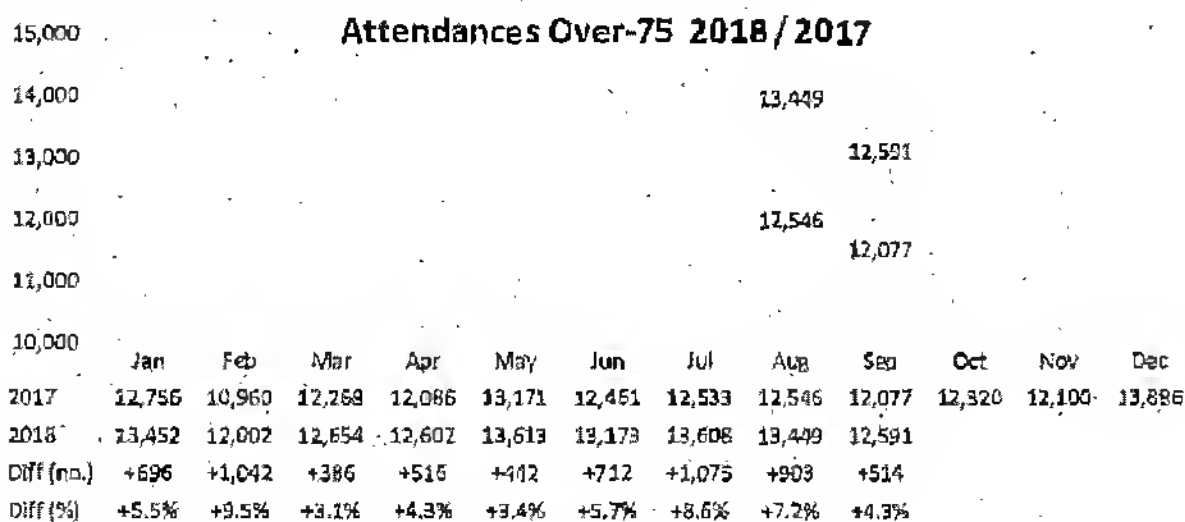
- This year to date, there have been 962,842 attendances, 33,171 (+3.6%) more than the same period last year (929,671).
- There were 105,820 ED attendances in September 2018, 1,537 (-1.4%) fewer than the previous month (107,357), and 2,301 (+2.2%) more than the same month last year (103,519).



Attendances and admissions exclude Navan.

3. ED Attendances of Over-75s

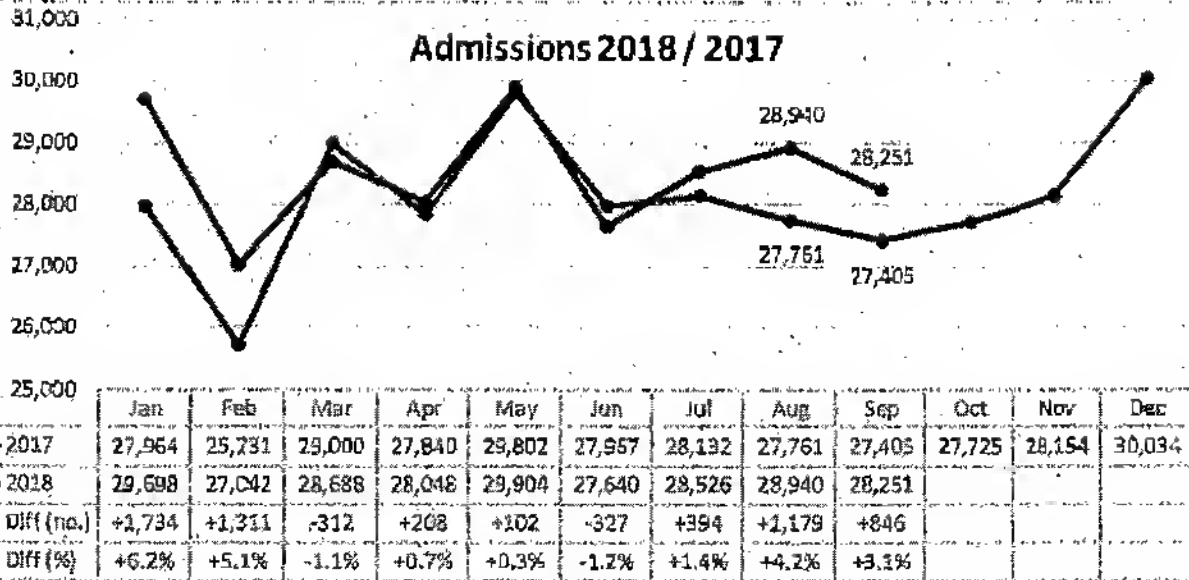
- This year to date, there have been 117,130 attendances of patients over 75, which was 6,272 (+5.7%) more than the same period last year (110,858).
- There were 12,591 ED attendances of patients over 75 in September 2018 (12.2% of all ED attendances), which was 858 (-6.4%) fewer than the previous month (13,449), and 514 (+4.3%) more than the same month last year (12,077).



Attendances and admissions exclude Navan.

4. ED Admissions

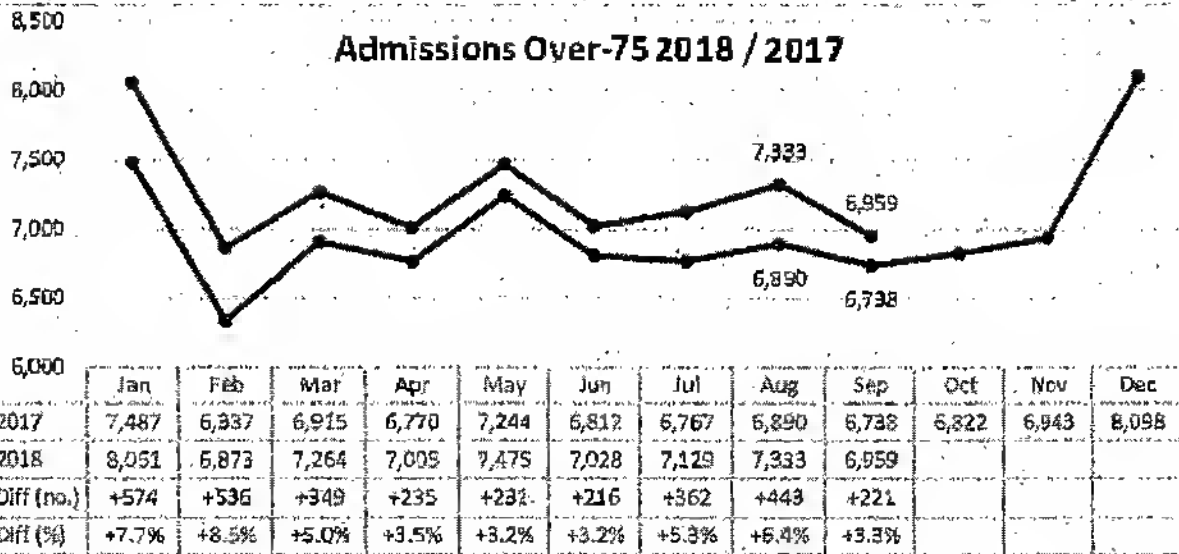
- This year to date, there have been 256,730 admissions, 5,128 (+2.0%) more than the same period last year (251,602).
- There were 28,251 ED admissions in September 2018, 689 (-2.4%) fewer than the previous month (28,940), and 846 (-3.1%) fewer than September 2017 (27,405).



Attendances and admissions exclude Navan

5. ED Admissions of Over-75s

- This year to date, there have been 65,125 admissions of patients over 75, 3,165 (+5.1%) more than the same period last year (61,960).
- There were 6,959 ED admissions of patients over 75 in September 2018 (25.4% of all ED admissions), 374 (-5.1%) fewer than the previous month (7,333), and 221 (+3.3%) more than the same month last year (6,738).



Attendances and admissions exclude Navan.

6. Delayed Discharges (DDs)

- There was a daily average of 605 delayed discharges in September 2018, which was 11 (-1.9%) fewer than the previous month (594).

7. Actions underway to tackle overcrowding in hospital Emergency Departments

The Winter Planning Process

Response to the Capacity Review

- The Department is working closely with the HSE to ensure the most effective response to the winter challenges to unscheduled care provision, and we expect to receive the Winter Plan for 2018/19 on 9 November.
- This work commenced in January following the publication of the Capacity Review. A process was put in place to identify beds for opening in the short to medium term. From this process 609 Acute beds and 290 Residential Care beds were identified.
- Of these 288 Acute beds and 190 residential care beds were identified for opening during Winter 2018/2019.
- In addition, to support additional bed capacity, and in line with the findings of the Capacity Review, targeted clinical interventions and increased home support packages were identified.
- Investment to support the delivery of the additional capacity and supports formed a significant element of the Departments Slaintecare Implementation Plan discussed in Summer 2018.

Budget 2019

- €10m in funding has been allocated in 2018 primarily for provision of supports to get patients home from hospital, where appropriate, before the end of the year, with a focus on supporting patients in the over 75 age group. The core objective of this measure is to ease congestion in hospitals as far as possible before the end of the year, to prepare for the expected peak in demand in the New Year.
- The Minister has requested the HSE to ensure that activity in 2019 is planned to manage critical demand pressures, most particularly in respect of increased attendance at emergency departments. This planning will include activity in hospitals, primary care and community care.
- Increasing capacity is a priority for the Government. Over the past 12 months, an additional 240 beds have been opened and a further 79 additional beds are planned for Quarter 4 2018 and early 2019.
- This includes an additional 30-bed ward in Our Lady of Lourdes Drogheda, a 40-bed modular ward block in South Tipperary General Hospital, and four high dependency beds in the Mater and Cork University Hospital respectively. In addition, the new ED planned for Our Lady of Lourdes Drogheda is due to open early in 2019.
- A further €10 million will be invested next year to enable additional beds to be opened to alleviate pressure on Emergency Departments for Winter 2019/20 and the years ahead, on foot of the recommendations in the Health Service Capacity Review.

- The Department is currently in discussion with the HSE, in the context of the National Service Plan 2019, to identify the sites for investment and the associated number of beds, as part of an agreed capacity programme for 2019.
- The selection and opening of beds in specific sites in 2019 and future years will be considered as part of the annual estimates and service planning process, and subject to financial, operational, human resource and policy considerations and priorities.

The Consolidated winter plan should include details of:

- the specific actions being taken to improve performance and operational grip, taking account of lessons learned exercise;
- the governance and accountability arrangements that will be in place to support, monitor and lead the Hospital Groups and CHOs over the Winter;
- the forecast demand for services over the period (including forecasts for attendance and admission of all patients and over 75's and the associated increase in activity planned to meet this demand; and
- the projected performance targets including weekly trolley numbers by hospital group, PET for over 75's and delayed discharging over the Winter period;
- An internal and external communication plan.

APPENDIX

Table 1 – National ED Performance September 2018 vs August 2018 and September 2017

	2018 September			2018 August				2017 September				2017 September YTD		
	#	YTD	Daily Avg	#	# Change	% Change	Daily Avg	#	# Change	% Change	Daily Avg	#	# Change	% Change
8aM Trolleys	7,319	75,521	244	6,919	400	+5.8%	223	7,674	-355	-4.6%	256	72,125	3,396	+4.7%
Attendances	105,820	962,842	3,527	107,357	1,537	+1.4%	3,463	103,519	2,301	+2.2%	3,451	929,671	33,171	+3.6%
Attendances >75	12,591	117,130	420	13,449	-858	-6.4%	434	12,077	514	+4.3%	403	110,858	6,272	+5.7%
Admissions	28,251	256,730	942	28,940	-689	-2.4%	934	27,405	846	+3.1%	914	251,602	5,128	+2.0%
Admissions >75	6,959	65,125	232	7,333	-374	-5.1%	237	6,738	221	+3.2%	225	61,960	3,165	+5.1%
Conversion Rate	26.7%	26.7%		27.0%		-0.3%		26.5%		+0.2%		27.1%		-0.4%
Conversion >75	55.3%	55.6%		54.5%		+0.7%		55.8%		-0.5%		55.9%		-0.3%
DD Average	605			594	11	+1.8%								



Winter Plans

Susan Scally to: JOE RYAN

08/11/2018 11:43

"DDG Operations (ddg.operations@hse.ie)", "Rothwell, Grace",
Cc: Scheduled & Unscheduled Care performance Unit, Press Office
- Dept Health

From: Susan Scally/SLAINTE

To: "JOE RYAN" [REDACTED]

Cc: "DDG Operations (ddg.operations@hse.ie)" <ddg.operations@hse.ie>, "Rothwell, Grace"
[REDACTED] Scheduled & Unscheduled Care performance Unit, Press Office
- Dept Health/SLAINTE/SLAINTE

Dear Joe

The Minister is meeting with the Taoiseach tomorrow afternoon at 4pm and one of the high priority issues on the agenda will be the Winter Plan 2018/19.

In this context, the Winter Plan is now required by the Department as a matter of urgency today.

I would be grateful if you would send on the Plan as soon as possible.

Please contact me if there are any issues about this.

Kind regards,

Susan

Susan Scally | Principal Officer | Scheduled & Unscheduled Care Performance Unit
Department of Health | Hawkins House | Hawkins Street | Dublin D02 VW90
[REDACTED]



Fw: Re: HSE Winter Plan 2018/2019
Paul Bolger to: Aisling McQuaid

11/12/2018 10:22

Paul Bolger
Director Scheduled & Unscheduled Care Performance Unit

An Roinn Sláinte
 Department of Health

Block 1, Plaza Missagh, 50 - 58 Sráid Bhagóid Iochtarach, Baile Átha Cliath, D02 XW14
 Block 1, Missagh Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14

— Forwarded by Paul Bolger/SLAINTE on 11/12/2018 10:22 —

From: "DDG Operations" - [redacted]
To: "Paul Bolger" [redacted]
Date: 09/11/2018 11:44
Subject: RE: Re: HSE Winter Plan 2018/2019

Hi Paul,

Thank you for your email. Would it be possible for the meeting to take place between 2.45pm and 3.45pm? Anne has a meeting in the DoH later on Monday afternoon so a slightly later start time would suit better. I will confirm on Monday other attendees from the HSE. Could you advise who else from the DoH will be present.

Many thanks

Regards,

Deirdre McKeown

Óifig an Leas-Stiúrthóir Ginearálta - Príomhfhéidhmeannach Oibríochtaí Oifigeach | Seomra 1.38
 | Ospidéal an Dr. Steevens | Baile Átha Cliath 8 | D08 W2A8 |
 Office of the Deputy Director General - Chief Operations Officer | Room 1.38 | Dr. Steevens' Hospital
 | Dublin 8 | D08 W2A8 |

Tel/Ph: [redacted]
 [redacted]

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From: Paul Bolger [redacted]
Sent: 09 November 2018 13:20

To: DDG Operations

Cc: Grace Rothwell; Susan Scally; Niall Redmond

Aisling McQuaid; Greg Dempsey

Subject: RE: Re:HSE Winter Plan 2018/2019

Deirdre,

Many thanks and yes Monday afternoon would be great. I am free at 2.30 if suitable?

We are currently reviewing the plan and will be in a position to have a fully informed discussion on Monday. However, to assist the meeting on Monday I have included some initial feedback below. I would be grateful if these could be considered in advance of the call on Monday.

1. there are a number of positive aspects to the plan and it is clear that the HSE is adopting an innovative approach to Winter planning this year - in particular the focus period, associated actions and targeted sites, the strong governance structure and 4 important public campaign. The confirmation that the HSE have also approved the integrated plans submitted by Hospital Groups and CHO's on the basis that they confirm preparedness in respect of Planning and Escalation, Operational Management of Patient Flow and Maintaining public Health is welcome.
2. the three options presented are not in line with the funding allocated in Budget 2019 nor the requirement given in the letter of determination regarding planning activity to meet demand. As per decision taken at Budget time and my letter to you of October 19, the €10 million in funding is once-off and must be spent within the current fiscal year. The full year cost of any measures taken in Q4 2018 must be met by the HSE from within their overall allocation.
3. the letter of determination requested that the HSE plan activity to meet known periods of demand through Acute, Primary and Social Care measures. The Winter Plan does not acknowledge or take account of this requirement and no additional home support or other community, primary care measures are proposed in Q1 2019.
4. the plan does not include projections in terms of activity, demand, and outcomes as requested.
5. I sanctioned, with immediate effect, the release of €5 million of funding in October to support older patients transition from acute care to the most appropriate setting - it would appear from the plan submitted that measure to achieve this objective have not commenced.
6. In relation to option three, 30 beds are proposed for hospitals that are not "key sites of concern" - Connolly, Monaghan, Cavan. On what basis have these be included and would the €500k associated with the opening of these beds be better focused on the sites of concern?
7. In my letter of 19 October I made reference to the €10 million for bed capacity in 2019 and the requirement to include agreed plans in the NSP. What is the status of the work on this, who is the lead and has consideration been given to use a small proportion of this funding to open beds at the key sites of concern in Q1?
8. in Greg's letter from September he made reference to the use of AMAU's during the period. Is the extension of opening hours and the protection from escalation protocols something that could be considered during the focus period.
9. with regard to the focus period, as mentioned above this is a very positive initiative, and I welcome the focus on pre and post Christmas. Is there flexibility to extend the focus period further into January? Also, we might discuss on Monday the potential for the NTPF to support some elements of the proposal during this period insofar as they relate to access to diagnostics and private providers.
10. The issue regarding early decision for the capacity proposal is noted. However, as I have pointed out previously we fully support the capacity plan but were unable to secure funding in the Summer nor did we secure funding in Budget 2019 for the full implementation. As I have outlined previously, the scale of the supplementary in 2018 was a significant barrier to securing funding for the plan. The €10 million referenced in

point 7 is the opportunity to begin to progress the capacity plan and I understand that a review of Capital is also underway.

Regards

Paul

Paul Bolger

Director Scheduled & Unscheduled Care Performance Unit

An Roinn Stáinle

Department of Health

Block 1, Plaza Miesach, 50 - 58 Sráid Bhagáid Iochtarach, Baile Átha Cliath, D02 XW14

Block 1, Miesian Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14

From: DDG Operations <ddg.operations@hse.ie>

To: "Paul [REDACTED]"

Cc: Grace Rotiwell [REDACTED]

Date: 09/11/2018 09:43

Subject: RE: Re:HSE Winter Plan 2018/2019

Hi Paul

Further to your email regarding a teleconference this morning regarding the Winter Plan 2018/2019, unfortunately Anne is unavailable today for a teleconference due to annual leave. She would have some availability on Monday afternoon if that suited.

Many thanks

Regards,

Deirdre McKeown

Óifig an Leas-Stiúrthóir Ginearálta - Príomhfhéidhmeannach Oibríochtaí Oifigeach | Seomra 1.38
| Ospidéal an Dr. Steevens | Baile Átha Cliath 8 | D08 W2A8 |

Office of the Deputy Director General - Chief Operations Officer | Room 1.38 | Dr. Steevens' Hospital

[Dublin 8] D08 W2A8]

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From: Paul Bolger@ [REDACTED]
Sent: 08 November 2018 19:48
To: DDG Operations
Cc: [REDACTED] Simon Spill [REDACTED] Grace Rothwell
Subject: Re: HSE Winter Plan 2018/2019

Anne

Many thanks for correspondence below and we will review the plan as a matter of urgency,

To assist this process, and in light of the early receipt of the plan and need for decisions on next steps, I would propose a teleconference in the morning to discuss the plan and the rationale behind the measures and the individual sites/groups chosen under the different options.

I would also be interested in understanding the forecast demand for services over the period, and, under each option the projected performance targets including weekly trolley numbers by hospital group, PET for over 75's and delayed discharges over the period.

I would propose a call for 11am, if suitable?

Kind regards

Paul

Sent from IBM Notes Traveler

DDG Operations --- HSE Winter Plan 2018/2019 ---

From: "DDG Operations" <ddg.operations@hse.ie>
To: "Greg Dempsey" [REDACTED]
Cc: Paul Bolger [REDACTED] "Grace Rothwell" [REDACTED]
Date: Thu, 8 Nov 2018 6:35 PM
Subject: HSE Winter Plan 2018/2019

Dear Greg

Further to previous discussion, please find attached the HSE Winter Plan 2018/2019 for your attention. Early acknowledgement of the Plan would be appreciated given our urgent need to progress

the agreed actions.

Regards,

Anne O'Connor

Leas-Stiúrthóir Ginearálta - Príomhfheidhmeannach Oibríochtaí Oifigeacha | Seomra 1.38 | Ospidéal
an Dr. Steevens | Baile Átha Cliath 8 | D08 W2A8 |
Deputy Director General - Chief Operations Officer | Room 1.38 | Dr. Steevens' Hospital | Dublin
8 | D08 W2A8 |

Email: ddg.operations@hse.ie

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tá sé ar intinn go bhfaighfidh siad san amháin é agus gurb iad san amháin a dhéanfaidh breithniú air. Más rud é nach tusa an duine ar leis é, tá cosc lomán ar son thaisnéis atá ann, a dásáid, a chreabhscaoilteadh, a scaipeadh, a nochtadh, a fhoilsiú, ná a chloipeáil. Seáine gurb iad tuairimí pearsanta an údar atá san ríomhphost agus nach tuairimí FSS iad. Má fuair tú an ríomhphost seo trí dhearmad, bheadh muid buíoch dá gcuirfá in iúl don Doasc Seirbhíse ECT ar an nguthán ag +353 818 300300 nó ar an ríomhphost chuig service.desk@hse.ie agus ansin glan an ríomhphost seo d'ed' chóras."

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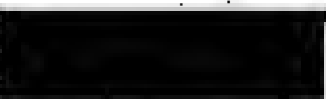
Fw: Winter Initiative
Paul Bolger to: Aisling McQuaid

11/12/2018 10:23

Paul Bolger
Director Scheduled & Unscheduled Care Performance Unit

An Roinn Sláinte
Department of Health

Block 1, Plaza Míesach, 50 - 58 Sráid Bhagóid Iochtarach, Baile Átha Cliath, D02 XW14
Block 1, Mission Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14



----- Forwarded by Paul Bolger/SLAINTE on 11/12/2018 10:23 -----

From: Paul Bolger/SLAINTE
To: ANGELA FITZGERALD [REDACTED]
Date: 09/11/2018 10:28
Subject: Re: Fwd: Winter Initiative

Angela

Thanks for your email.

I fully agree that collaboration is key and any NTPF led Initiative should only be considered if it compliments the HSE plans. The Minister has raised this issue on a number of occasions with the NTPF and the HSE at our regular governance meetings.

With regard to the estimates/NSP and the €10 million for bed capacity in 2019 - what is the status of this proposal. I have not received any feedback on the proposal.

Regards

Paul

Paul Bolger
Director Scheduled & Unscheduled Care Performance Unit

An Roinn Sláinte
Department of Health

Block 1, Plaza Míesach, 50 - 58 Sráid Bhagóid Iochtarach, Baile Átha Cliath, D02 XW14
Block 1, Mission Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14



[REDACTED]

ANGELA FITZGERALD

Hi Paul As you know , Anne O Connor is c...

08/11/2018 13:12:12

From: ANGELA FITZGERALD
To: "Paul, B..."
Date: 08/11/2018 13:12
Subject: Fwd: Winter Initiative

Hi Paul

As you know , Anne O Connor is chairing a weekly meeting on Winter Planning and as part of this process is looking at additional measures for the 3/4 week period over Christmas and New Year. In this context we are in discussions with the Private Providers about areas of collaboration including diagnostics.

We were not aware of this initiative . We very much welcome the NTPF contribution to these initiatives but I think it would be important that we work collaboratively in this regard. I will liaise directly with Liam Sloyan today so we avoid duplication of effort.

He called me yesterday and it may have been about this issue but I was tied up in the Estimates process.

We might discuss later.

Kind regards
Angela

Sent from my iPhone

Begin forwarded message:

Dear All

The NTPF has been requested by the Department of Health to submit a proposal on support to the Health system over the winter months and in particular the potential to provide funding to ensure greater access to diagnostics in public or private facilities and additional bed capacity in private hospitals in the new year.

Apologies for the short notice but a proposal must be submitted to the Department on Friday so I would appreciate if you could submit your proposals (with costs) to me by early Friday morning to ensure inclusion for additional funding that may be provided.

Best Regards
Seán

Seán Flood

Finance Director

National Treatment Purchase Fund, 6th Floor, Ashford House, Tara Street, Dublin 2 D02 VX

67
[REDACTED]

Tá an t-eolas sa ríomhphost seo, agus in aon cheanglán leis, faoi phribhléid agus faoi rún agus le haghaidh an tseolai amháin.

D'fhéadfadh an t-eolas seo a bheith faoi phribhléid phroifisiúnta nó dlíthiúil. Mura tusa an seolai a bhí beartaithe leis an ríomhphost seo a fháil, tá cosc air, nó aon chuid de, a úsáid, a chóipeáil, nó a scaoileadh. Má tháinig sé chugat de bhrí dearmaid, téigh i dteagmháil leis an seoltóir agus scríos an

t-ábhar ó do ríomhaire le do thoil.

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RE: HSE Winter Plan Meeting Monday 12th

DDG Operations

to:

Lea_Valance@ [REDACTED]

09/11/2018 16:54

Hide Details

From: DDG Operations <ddg.operation@hse.ie>

To: "Lea_Valance@ [REDACTED]"

Many thanks Lea

Regards,

Deirdre McKeown

Oifig an Leas-Stiúrthóir Ginearálta - Príomhfhéidhmeannach Oibríochtaí Oifigeach | Seomra 1.38 | Ospidéal an Dr. Steevens | Baile Átha Cliath 8 | D08 W2A8 |
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From: Lea_Valan [REDACTED]

Sent: 09 November 2018 16:50

To: DDG Operations

Cc: Aisling_McQuaid [REDACTED]

Subject: HSE Winter Plan Meeting Monday 12th

Dear Deirdre,

Following your correspondence with Paul earlier, we have organised a meeting for Monday 12th at 2:45pm to discuss the HSE Winter Plans with DoH colleagues. A conference room has been organised in Miasian Plaza (room 721). In attendance from the DoH will be: Greg Dempsey, Deputy Secretary; Paul Boger, Director Scheduled and Unscheduled Care Performance Unit, Niall Redmond, Services for Older People and Aisling McQuaid, Scheduled and Unscheduled Care Performance Unit.

If you have any queries regarding this, please do not hesitate to contact me.

Kind regards,

Lea

Lea Valance

Administrative Officer, Scheduled and Unscheduled Care Performance Unit

An Roinn Sláinte
Department of Health

Block 1, Plaza Meeach, 50 - 58 Bráid Bhagóid Iochtarach, Baile Átha Cliath, D02 XW14
Block 1, Meean Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14

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RE: Draft Performance Monitoring & Communications Protocol for Winter 2018 / 2019
Rothwell, Grace

to:

Susan Scally [REDACTED]

13/11/2018 11:13

Cc:

"JOE RYAN [REDACTED]"

"Scheduled_ & _Unscheduled_Care_performance_Unit@health.irigov.ie"

Hide Details

From: "Rothwell, Grace" [REDACTED]

To: "Susan Scally [REDACTED]"

Cc: "JOE RYAN [REDACTED]"

"Scheduled_ & _Unscheduled_Care_performance_Unit@health.irigov.ie"

<Scheduled_ & _Unscheduled_Care_performance_Unit@health.irigov.ie>

Great - thanks Susan, see you tomorrow.

Grace

From: Susan Scally@ [REDACTED]

Sent: 13 November 2018 11:12

To: Rothwell, Grace

Cc: JOE RYAN (joe.ryan@hse.ie); Scheduled_ & _Unscheduled_Care_performance_Unit@health.irigov.ie

Subject: Re: Draft Performance Monitoring & Communications Protocol for Winter 2018 / 2019

Hi Grace

That's fine. We had planned to deal with the communications protocol as part of the agenda tomorrow. We will put it on as the last point on the agenda, allowing those not directly involved to leave - and we can deal in a separate session.

Hope that works for you.

Susan

Susan Scally | Principal Officer | Scheduled & Unscheduled Care Performance Unit
Department of Health | Hawkins House | Hawkins Street | Dublin D02 VW90

From: "Rothwell, Grace" <[REDACTED]>

To: "Susan [REDACTED]"

Cc: "JOE RYAN [REDACTED]"

Date: 13/11/2018 11:05

Subject: Re: Draft Performance Monitoring & Communications Protocol for Winter 2018 / 2019

Hi Susan,

Given we have a weekly engagement tomorrow am wondering if we could equally have an additional session to review the Draft protocol as shared with you and seek to progress same to Final Draft for review and approval / amendment by our colleagues.

Thanks,

Grace

From: Rothwell, Grace
Sent: 06 November 2018 16:42
To: Susan, Scally [REDACTED]
Cc: JOE RYAN [REDACTED]
Subject: Re: Draft Performance Monitoring & Communications Protocol for Winter 2018 / 2019
Importance: High

Dear Susan,

Please accept the current Draft version of the HSE's USC Performance Monitoring & Communications Protocol for your review and feedback as the DoH Lead for same. We might have opportunity to discuss tomorrow.

Please note that this document is not for circulation at this time as it remains a draft document and for approval by our colleagues once in final draft format.

Thanking you.

Grace Rothwell
Head of the SDU
Acute Hospitals Division
Health Service Executive
[REDACTED] St. Canice's Building
Dublin Road Kilkenny



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Winter Plan 2018/2019 - Meeting held on 12 November

Greg Dempsey, Paul Bolger, 'DDG'
Aisling McQuaid to: Operations' (ddg.operations@hse.ie),
Iliam Woods, Niall Redmond, Dave

14/11/2018 10:59

Cc: Scheduled & Unscheduled Care performance Unit, Susan Scally

Dear Colleagues,

Please see below the key actions arising from the Winter Plan meeting of 12 November.

1. HSE to provide a revised draft of the Winter Plan, which reflects recent decisions on allocation of funding for winter measures in 2018/19 specifically:-

- National Service Plan to ring fence an appropriate amount of funding to continue measures initiated in 2018 from the €10m budget;

- National Service Plan to make appropriate provision to manage critical demand pressures in the first and last quarters of 2019;

- HSE to work with DoH to identify sites for investment and the associated number of beds, as part of an agreed Capacity Programme for 2019.

2. HSE to consider the potential role of the National Treatment Purchase Fund to address demand pressures in the Winter 2018/19 period;

3. Winter Plan to include the forecast demand for services over the period, including forecasts of attendance and admissions of all patients and over 75s and the associated increase in activity planned to meet this demand and the projected performance targets including weekly trolley numbers by hospital

group, PET for over 75s and delayed discharging during the winter period.

Having regard to the above, please provide revised draft of Plan by noon on Friday, 16 November.

Regards,

Aisling

Aisling McQuaid
Assistant Principal, Scheduled & Unscheduled Care Performance Unit

An Roinn Sláinte
Department of Health

Block 1, Plaza Miesach, 50 - 58 Sráid Bhagóid Íochtarach, Baile Átha Cliath, D02 XW14
Block 1, Miesian Plaza, 50 - 58 Lower Baggot Street, Dublin, D02 XW14

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